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Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of Illinois	
Case number (If known):	Chapter you are filing under: Chapter 7 Chapter 11
	☐ Chapter 12 ☐ Chapter 13
Experience of the state of the	and the second of the second companion of the second and the second of t

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

AUG 24 2018

JEFFREY P. ALLSTEADT, CLERK

INTAKERE & if this is an amended filling

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

P	artific Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture	Aubrey	
	identification (for example,	First name	First name
	your driver's license or	L	
	passport).	Middle name	Middle name
	Bring your picture	Fox	\mathcal{K}
	identification to your meeting with the trustee,	Last name	Last name
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
	have used in the last 8 years	First name	First name
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
nicentiti			
3.	Only the last 4 digits of	9 7 4 4	
	your Social Security	xxx - xx - 8 7 1 1	xxx - xx
	number or federal	OR S	OR
	Individual Taxpayer Identification number (ITIN)	9 xx - xx	9 xx - xx

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Case number (# known)_

Aubrey L Fox

First Name

Debtor 1

First Name Middle	Name Last Name	Case number (# known)
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Any business names and Employer Identification Numbers (EIN) you have used in	☑ I have not used any business names or EINs.	☐ I have not used any business names or EINs.
the last 8 years	Business name	Business name
Include trade names and doing business as names	Business name	
	business name	Business name
	EIN	EIN — — — — — —
	EIN	EIN
5. Where you live		If Debtor 2 lives at a different address:
	16340 Kedzie	
	Number Street	Number Street
	Markham IL 60428	
	City State ZIP Code	City State ZIP Code
	Cook County	
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	P.O. Box	P.O. Box
	City State ZIP Code	City State ZIP Code
6. Why you are choosing	Check one:	Check one:
this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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ebtor 1 Aubrey L F	OX lame	Last Ne	me		Case number (#	f known)				
art 2: Tell the Court Abo	out Your	Bankru	ıptcy Case							
The chapter of the Bankruptcy Code you	Check for Ban	one. (Fo	or a brief description of each, (Form 2010)). Also, go to the	see No	tice Required by 1	1 U.S.C. § 342(b) for Individuals Filing the appropriate box.				
are choosing to file under		for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7								
ulidei	☐ Cha	· apter 11	1							
		apter 12								
		ipter 13								
How you will pay the fee	loca you sub with	il court rself, you mitting a pre-	for more details about ho ou may pay with cash, cas your payment on your bel printed address. pay the fee in installmen	w you i shier's half, yo ts . If yo	may pay. Typica check, or money our attorney may	neck with the clerk's office in your ally, if you are paying the fee yorder. If your attorney is pay with a credit card or check ption, sign and attach the ents (Official Form 103A).				
	By l less pay	aw, a ju than 1 the fee	udge may, but is not requi 50% of the official poverty	red to, / line th loose tl	waive your fee, at applies to you his option, you n	tion only if you are filing for Chapter 7 and may do so only if your income is ur family size and you are unable to nust fill out the Application to Have the with your petition.				
Have you filed for bankruptcy within the	□ No									
last 8 years?	Yes.	District	northern district of ill	_ When	09/30/2015 MM / DD / YYYY	_ Case number <u>15-33401</u>				
		District	niorthern district of ill	When	10/27/2017	Case number 17-09887				
		5)			MM / DD / YYYY	Marie Marie - Individual Company Compa				
		District	No.	When	MM / DD / YYYY	Case number				
Are any bankruptcy	☑ No									
cases pending or being filed by a spouse who is	☐ Yes.	Debtor				Relationship to you				
not filing this case with you, or by a business partner, or by an affiliate?					MM/DD/YYYY	Case number, if known				
anniale r		Debtor	# C C C C C C C C C C			_ Relationship to you				
				_ When		Case number, if known				
					MM / DD / YYYY					
Do you rent your residence?	☑ No. ☐ Yes.	Go to li Has yo	ine 12. ur landlord obtained an evicti	ion judg	ment against you?	?				
		☐ Yes	. Go to line 12. s. Fill out <i>Initial Statement Ab</i> t of this bankruptcy petition.	out an E	Eviction Judgment	Against You (Form 101A) and file it as				

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Debtor 1 Aubrey L F	X Case number (if known)
Daniel Daniel Alexandria	
Report About Any	usinesses You Own as a Sole Proprietor
12. Are you a sole proprietor of any full- or part-time	No. Go to Part 4.
business? A sole proprietorship is a	Yes. Name and location of business
business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or	Name of business, if any
LLC. If you have more than one	Number Street
sole proprietorship, use a separate sheet and attach it	
to this petition.	City State ZIP Code
	Check the appropriate box to describe your business:
	☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
	☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
	☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
	☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
	☐ None of the above
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small	f you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). No. I am not filing under Chapter 11.
business debtor, see 11 U.S.C. § 101(51D).	No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
	Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Port 4	
Part 4: Report if You Own o	Have Any Hazardous Property or Any Property That Needs Immediate Attention
4. Do you own or have any property that poses or is	3 No
alleged to pose a threat	Yes. What is the hazard?
of imminent and identifiable hazard to public health or safety?	
Or do you own any property that needs immediate attention?	If immediate attention is needed, why is it needed?
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?	
,	Where is the property? Number Street
	uartiner 2fl86f
	City State ZIP Code

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Debtor	1	
Centor		

Aubrey L Fox
First Name Last Name

Case number (if known)_____

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will tose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required	to receive	al	oriefing	about
credit counseling	because	of:		

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

ш	I am not required to receive a briefing a	about
	credit counseling because of:	

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court,

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De	ebtor 1 Aubrey L F First Name Middle Nam	OX ne Last Name	Case nu	mber (# known)				
P	art 6: Answer These Que	stions for Reporting Purpos	EAC					
16	What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."						
		☐ No. Go to line 16b, ☑ Yes. Go to line 17.						
		16b. Are your debts primar money for a business or in	rily business debts? Busine. evestment or through the operation	ss debts are debts that you incurred to obtain on of the business or investment.				
		No. Go to line 16c. Yes. Go to line 17.						
		16c. State the type of debts you	u owe that are not consumer deb	ts or business debts.				
17.	Are you filing under Chapter 7?	□ No. I am not filing under Cl	hapter 7. Go to line 18.	CCASCA-CARACTER STATE CONTROL CONTROL CONTROL CARACTER STATE CONTROL C	Jétakawateta			
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	☐ Yes, I am filing under Chapt administrative expense ☐ No ☐ Yes	ter 7. Do you estimate that after a es are paid that funds will be ava	any exempt property is excluded and lable to distribute to unsecured creditors?				
18	How many creditors do	2 1-49	1 ,000-5,000	25,001-50,000	50000000000000000000000000000000000000			
	you estimate that you owe?	50-99 100-199 200-999	5,001-10,000 10,001-25,000	☐ 50,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000				
19.	How much do you estimate your assets to be worth?	2 \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	on \$10,000,000,001-\$50 billion	MARCHINE (M.)			
20.	How much do you estimate your liabilities to be?	2 \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 mill	n \$10,000,000,001-\$50 billion	CONTENTION (A CONT			
Pa	rt 7: Sign Below							
Fo	r you	I have examined this petition, ar correct.	nd I declare under penalty of perj	ury that the information provided is true and				
		If I have chosen to file under Choof title 11, United States Code. I under Chapter 7.	apter 7, I am aware that I may pounderstand the relief available u	oceed, if eligible, under Chapter 7, 11,12, or 13 nder each chapter, and I choose to proceed				
		If no attorney represents me and this document, I have obtained a	d I did not pay or agree to pay so and read the notice required by 1	meone who is not an attorney to help me fill out 1 U.S.C. § 342(b).				
				States Code, specified in this petition.				
		I understand making a false state with a bankruptcy case can result U.S.C. §§ 152, 1341, 1519, a	Ilt in fines up to \$250,000, or imp	btaining money or property by fraud in connection risonment for up to 20 years, or both.	n			
		* July	*					
		Signature of Debter 1 Executed on MM / DD / Y	N N R	xecuted on				
		WIN / UU / Y	I I T	MM / DD / YYYY				

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For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this put to proceed under Chapter 7, 11, 12, or 13 of tit available under each chapter for which the period the notice required by 11 LLS C. \$ 342(b) and	e 11, United States Code, a son is eligible. Lalso certify t	nd have	e exp	olaine	ed the relief
f you are not represented by an attorney, you do not	the notice required by 11 U.S.C. § 342(b) and, knowledge after an inquiry that the information	in a case in which § 707(b)(4 in the schedules filed with th	l)(D) aj e petiti	oplie: on is	s, ce inco	rtify that I have no rect.
need to file this page.	*	Date				
	Signature of Attorney for Debtor	,	MM	1	DD	/YYYY
	Printed name	- PARAMAN - PARA				Total Control of Contr
	Firm name	. www.itt			nim.	
	Number Street		· =		***	
	City	State	ZiP Co	ode		
	Contact phone					
	Comact phone	Email address	***			· · · · · · · · · · · · · · · · · · ·
	Bar number	State				

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Aubrev Fox Debtor 1 Case number (if kno Last Name For you if you are filing this The law allows you, as an individual, to represent yourself in bankruptcy court, but you bankruptcy without an should understand that many people find it extremely difficult to represent attorney themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney. If you are represented by To be successful, you must correctly file and handle your bankruptcy case. The rules are very an attorney, you do not technical, and a mistake or inaction may affect your rights. For example, your case may be need to file this page. dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay. You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned. If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply. Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences? ☐ No ✓ Yes Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned? ☐ No 2 Yes Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms? ☑ No. Yes. Name of Person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case. Signature of Debtor 2 Date Date MM / DD / YYYY Contact phor Contact phone Cell phone Cell phone Email address Email address

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Fill in this in	nformation to id	entify your case:	A second	
Debtor 1	Aubrey L. F	Fox		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court fo	or the: Northern District of Illi	inois	3
Case number	(If known)		TO THE TOWN THE PARTY OF THE PA	

Check if this is an amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$8
1b. Copy line 62, Total personal property, from Schedule A/B	\$1,300.00
1c. Copy line 63, Total of all property on Schedule A/B	\$1,300.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$ 44,130.00
Your total liabilities	\$44,130.00
Part 8: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$4,013.00
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$3,910.00

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Case number (if known)_

Aubrey L. Fox
First Name Middle Name

Last Name

Debtor 1

Ę	art 4: Answer These Questions for Administrative and Statistical Record	İs	
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?		
	No. You have nothing to report on this part of the form. Check this box and submit this✓ Yes	form to the court with your othe	r schedules.
⁷ .	What kind of debt do you have?	PRINTERNAL AND	annung (Milipanis) et delika salamining sena kari berdik Arjember meneri senanda bandup dapah per
	Your debts are primarily consumer debts. Consumer debts are those "incurred by a family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purp	n individual primarily for a persooses. 28 U.S.C. § 159.	nal,
	Your debts are not primarily consumer debts. You have nothing to report on this pathis form to the court with your other schedules.	rt of the form. Check this box ar	nd submit
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly in Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	ncome from Official	\$ <u>4,764.00</u>
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:		
	From Part 4 on <i>Schedule E/F</i> , copy the following:	Total claim	
	9a. Domestic support obligations (Copy line 6a.)	\$	
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00	
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00	
	9d. Student loans. (Copy line 6f.)	\$0.00	
	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 	\$0.00	
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$ 0.00	
	9g. Total. Add lines 9a through 9f,	\$0.00	

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Fill in this in	formation to ide	entify your case and this	filing:		
Debtor 1	Aubrey L. Fo	ox			
	First Name	Mkidle Name	Lest Name	-	
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name	- [
	3ankruptcy Court fo	r the: Northern District of I	linois		
Case number			······		Поп
					Check if amende

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

No. Go to Part 2. Yes. Where is the property?			
.1. Street address, if available, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule I Creditors Who Have Claims Secured by Property Current value of the entire property? portion you own?	
City State ZIP Code	Investment property Timeshare Other Who has an interest in the property? Check one.	Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.	
County	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this it property identification number:	Check if this is community property (see instructions)	
ou own or have more than one, list here:	property recommended recommended.		
ou own or have more than one, list here: 2. Street address, if available, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D Creditors Who Have Claims Secured by Property Current value of the entire property? \$ 0.00 \$ 0.	
2	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D Creditors Who Have Claims Secured by Property Current value of the Current value of the entire property? portion you own?	
2. Street address, if available, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D Creditors Who Have Claims Secured by Property Current value of the entire property? portion you own? \$ 0.00 \$ 0. Describe the nature of your ownership interest (such as fee simple, tenancy by	

What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put ☐ Single-family home the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Condominium or cooperative Current value of the Current value of the entire property? portion you own? Manufactured or mobile home 0.00 ☐ Land Investment property City State ZIP Code Timeshare Describe the nature of your ownership interest (such as fee simple, tenancy by Other_ the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only ☐ Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages 0.00 you have attached for Part 1. Write that number here. **Describe Your Vehicles** Part 2: Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Who has an interest in the property? Check one. 3.1. Make: Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D: Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: 0.00 ☐ Check if this is community property (see instructions) If you own or have more than one, describe here: Who has an interest in the property? Check one. 3,2, Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D; Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: 0.000.00 ☐ Check if this is community property (see instructions)

Case 18-24015

Aubrey L. Fox

First Name

Debtor 1

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Case number (if know

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Document Page 13 of 61 Aubrey L. Fox Debtor 1 Case number (if know Last Name Who has an interest in the property? Check one. Make: 3.3. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: 0.00 0.00 Check if this is community property (see instructions) Who has an interest in the property? Check one. Make: 3.4. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only portion you own? entire property? Approximate mileage: At least one of the debtors and another Other information: 0.00 0.00 Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No ☐ Yes Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another entire property? portion you own? ☐ Check if this is community property (see 0.00 instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. 4.2. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another 0.00 0.00 ☐ Check if this is community property (see instructions) Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages 0.00 you have attached for Part 2. Write that number here

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Debtor 1

Aubrey L. Fox

Case number (if known)

Do you own or have any legal or equitable interest in any of the following items?	portion y	value of the you own?
		duct secured claims lons.
6. Household goods and furnishings	restre til i sterrativativa etta apapapapatetti	· · · · · · · · · · · · · · · · · · ·
Examples: Major appliances, furniture, linens, china, kitchenware		
□ No		
☑ Yes. Describe Furniture	\$	500.00
7. Electronics		
Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; mucollections; electronic devices including cell phones, cameras, media players, games	sic	
☐ No ☐ Yes, Describe Electronics	\$	300.00
8. Collectibles of value		
Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No		
Yes. Describe	\$	0.00
9. Equipment for sports and hobbies		
Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; cand and kayaks; carpentry tools; musical instruments	oes	
☐ No ☐ Yes. Describe		0.00
	\$	0.00
10. Firearms	110mm m Landon market (16,7)-4 (16,6)	
Examples: Pistols, rifles, shotguns, ammunition, and related equipment		
Q No		
Yes. Describe	\$	0.00
11. Clothes		
Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories		
No Claff		
Yes. Describe	\$	500.00
12. Jewelry		
Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems gold, silver	3,	
☑ No		
Yes. Describe	\$	0.00
13. Non-farm animals	rumonnam.mum naonumam.mumil	
Examples: Dogs, cats, birds, horses		
☑ No		
Yes. Describe	\$	0.00
14. Any other personal and household items you did not already list, including any health aids you did not list		
☑ No		
1 I Van Civa annaise	_	0.00
Yes. Give specific information	3	

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Debtor 1

Aubrey L. Fox First Name Middle Name Document

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Part 4: Describe Your Financial Assets

	ny legal or equitable interest in	any of the following?	portion ye	ict secured claims
16. Cash <i>Examples:</i> Money yo	ou have in your wallet, in your ho	me, in a safe deposit box, and on hand when you file your petition		
No No				
Q Yes		Cash:	\$	0.00
and other	, savings, or other financial accor similar institutions. If you have n	unts; certificates of deposit; shares in credit unions, brokerage houses, nultiple accounts with the same institution, list each.		
U No ☑ Yes		Institution name:		
	17.1. Checking account:	Bank of America	\$	200.00
	17.2. Checking account:	until the control of	\$	0.00
	17.3. Savings account:		\$	0.00
	17.4. Savings account:	Weekler and the second	\$	0.00
	17.5. Certificates of deposit:		\$	0.00
	17.6. Other financial account:		\$	0.00
	17.7. Other financial account:		\$	0.00
•	17.8. Other financial account:	the state of the s	\$	0.00
	17.9. Other financial account:	-4	\$	0.00
	s, or publicly traded stocks s, investment accounts with broke Institution or issuer name:	erage firms, money market accounts		
Examples: Bond funds No	s, investment accounts with broke	erage firms, money market accounts	\$	0.00
Examples: Bond funds No	s, investment accounts with broke	erage firms, money market accounts	\$ \$	0.00
Examples: Bond funds No	s, investment accounts with broke	erage firms, money market accounts	\$ \$ \$	
Examples: Bond funds No Yes	stock and interests in incorpor, and joint venture Name of entity:	rated and unincorporated businesses, including an interest in ### Of ownership: 0%	\$\$ \$\$	0.00

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Case number (# known)

Non-negotiable instrum	include personal cl ents are those you	necks, cashiers' checks, promissory notes, and money orders. cannot transfer to someone by signing or delivering them.		
☑ No				
Yes. Give specific information about	Issuer name:		•	0.
them			\$	0
			\$	0
			Þ	
Retirement or pension Examples: Interests in If		, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans		
☑ No		, to tell, 199(b), think savings associated, or other periodicit or producting plans		
Yes. List each				
account separately.	Type of account:	Institution name:		
	401(k) or similar pla	n:	\$	0
	Pension plan:		\$	0
	IRA:		\$	0
	Retirement account		\$	0
	Keogh:		\$	0
	Additional account:		s	0
	Additional account:		<u> </u>	0
Your share of all unused	deposits you have	made so that you may continue service or use from a company		
Examples: Agreements vocampanies, or others	deposits you have	made so that you may continue service or use from a company raid rent, public utilities (electric, gas, water), telecommunications		
Your share of all unused Examples: Agreements of companies, or others No	deposits you have	made so that you may continue service or use from a company paid rent, public utilities (electric, gas, water), telecommunications		
Your share of all unused Examples: Agreements vocompanies, or others	l deposits you have with landlords, prep	made so that you may continue service or use from a company said rent, public utilities (electric, gas, water), telecommunications institution name or individual:		
Your share of all unused Examples: Agreements of companies, or others No	deposits you have with landlords, prep	aid rent, public utilities (electric, gas, water), telecommunications	\$	<u></u> .
Your share of all unused Examples: Agreements of companies, or others No	deposits you have with landlords, prep ! Electric:	aid rent, public utilities (electric, gas, water), telecommunications	\$ \$	0
Your share of all unused Examples: Agreements of companies, or others No	deposits you have with landlords, prep	naid rent, public utilities (electric, gas, water), telecommunications Institution name or individual:	\$ \$ \$	0
Your share of all unused Examples: Agreements of companies, or others No	deposits you have with landlords, prep	naid rent, public utilities (electric, gas, water), telecommunications Institution name or individual:	\$ \$ \$	0
Your share of all unused Examples: Agreements of companies, or others No	deposits you have with landlords, preposits you have with landlords, preposit on the security deposit on the prepaid rent:	naid rent, public utilities (electric, gas, water), telecommunications Institution name or individual:	\$ \$ \$ \$	0 0 0
Your share of all unused Examples: Agreements of companies, or others No	deposits you have with landlords, preposit lan	naid rent, public utilities (electric, gas, water), telecommunications Institution name or individual:	\$\$ \$\$ \$\$	0 0 0 0
Your share of all unused Examples: Agreements of companies, or others No	deposits you have with landlords, preposits you have with landlords, preposit on the security deposit on the prepaid rent:	naid rent, public utilities (electric, gas, water), telecommunications Institution name or individual:	\$\$ \$\$ \$\$ \$\$	0 0 0 0
Your share of all unused Examples: Agreements of companies, or others No	Electric: Gas: Heating oil: Security deposit on r Prepaid rent: Telephone: Water:	naid rent, public utilities (electric, gas, water), telecommunications Institution name or individual:	\$\$ \$\$ \$\$ \$\$	0 0 0 0
Your share of all unused Examples: Agreements of companies, or others No	deposits you have with landlords, preposits you have with landlords, preposit on a security deposit on a prepaid rent: Telephone: Water: Rented furniture:	naid rent, public utilities (electric, gas, water), telecommunications Institution name or individual:	\$\$ \$\$ \$\$ \$\$ \$\$	0 0 0 0
Your share of all unused Examples: Agreements woompanies, or others No Yes	Electric: Gas: Heating oil: Security deposit on r Prepaid rent: Telephone: Water: Rented furniture: Other:	naid rent, public utilities (electric, gas, water), telecommunications Institution name or individual:	\$\$ \$\$ \$\$ \$\$	0 0 0 0
Your share of all unused Examples: Agreements woompanies, or others No Yes	Electric: Gas: Heating oil: Security deposit on r Prepaid rent: Telephone: Water: Rented furniture: Other:	Institution name or individual:	\$\$ \$\$ \$\$ \$\$	0 0 0 0
Your share of all unused Examples: Agreements we companies, or others No Yes	Electric: Gas: Heating oil: Security deposit on r Prepaid rent: Telephone: Water: Rented furniture: Other:	Institution name or individual: rental unit: t of money to you, either for life or for a number of years)	\$\$ \$\$ \$\$ \$\$ \$\$	0 0 0 0 0 0
Your share of all unused Examples: Agreements to companies, or others No Yes	Electric: Gas: Heating oil: Security deposit on represent rent: Telephone: Water: Rented furniture: Other:	Institution name or individual: rental unit: t of money to you, either for life or for a number of years)	\$\$ \$\$ \$\$ \$\$	0 0 0 0

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	Aubrey L. Fox		Document	Page 17 of 61 Case number (if known)		
	First Name Middle	e Name Last	Name	- teasing		-
. "	entropy and a supplied that the second section is a second and	superior and the contract of t	and the control of th	ay are not make the manager of the contraction of t	Control Company of the Control	

24. Interests in an education IRA, in an a 26 U.S.C. §§ 530(b)(1), 529A(b), and 5	account in a qualified ABLE program, or under a qualified s 29(b)(1).	tate tuition program.		
☑ No				
Yes Institution	on name and description. Separately file the records of any inte	reets 11 IIS C 8 521	(c):	
			(.).	0.00
0.00			. \$ <u> </u>	0.00
			\$	0.00
			\$	0.00
25. Trusts, equitable or future interests in exercisable for your benefit	n property (other than anything listed in line 1), and rights	or powers		
☑ No				
☐ Yes. Give specific		The second control of		
information about them,			\$	0.00
Examples: Internet domain names, web	le secrets, and other intellectual property sites, proceeds from royalties and licensing agreements			
Yes. Give specific information about them				0.00
Information about them			\$	0.00
Z. Licenses, franchises, and other gene Examples: Building permits, exclusive lie No ☐ Yes. Give specific information about them	ral intangibles censes, cooperative association holdings, liquor licenses, profe	ssional licenses	s	0.00
mornation about them		MAANNAMA ET LYVETAY I VII I I I II I II I I I I I I I I I	,	<u> </u>
Money or property owed to you?			Current va portion yo Do not dedu claims or exe	u own? ct secured
28. Tax refunds owed to you		a ang da taon an an ang ang ang ang ang ang ang ang		
No				
Yes. Give specific information				0.00
about them, including whether		Federal:	\$	0.00
you already filed the returns and the tax years		State:	\$	0.00
and the tax yearst immunity	•••	Local:	\$	0.00
29. Family support Examples: Past due or lump sum alimon ☑ No ☐ Yes. Give specific information	ry, spousal support, child support, maintenance, divorce settlem	nent, property settleme	ent	
i es. Oive specific information		Alimony:	\$	0.00
		Maintenance:	\$	0.00
		Support:	\$	0.00
		Divorce settlement:	\$	0.00
		Property settlement:	\$	0.00
30. Other amounts someone owes you Examples: Unpaid wages, disability insu Social Security benefits; unpa	rance payments, disability benefits, sick pay, vacation pay, wor aid loans you made to someone else	rkers' compensation,		; ; ;
Yes. Give specific information	guardana and an annual and			
		the second secon	٦	
- rea. One specific information			\$	0.00

Document Page 18 of 61 Aubrey L. Fox Debtor 1 Case number of know 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance **2** No Yes. Name the insurance company Company name: Beneficiary: Surrender or refund value: of each policy and list its value... 0.00 0.00 0.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. M No ☐ Yes. Give specific information........ 0.00 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ☑ No Yes. Describe each claim..... 0.00 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No ☐ Yes. Describe each claim..... 0.00 35. Any financial assets you did not already list ☑ No ☐ Yes. Give specific information..... 0.00 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached 0.00 for Part 4. Write that number here Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned ✓ No Yes. Describe..... 0.00 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No. Yes. Describe... 0.00

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Document Page 20 of 61 Aubrey L. Fox Debtor 1 First Name 48. Crops-either growing or harvested No No ☐ Yes. Give specific information..... 0.00 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade ☐ Yes..... 0.00 50. Farm and fishing supplies, chemicals, and feed ☑ No ☐ Yes..... 0.00 51. Any farm- and commercial fishing-related property you did not already list ☑ No Yes. Give specific information..... 0.00 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached 0.00 for Part 6. Write that number here Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☑ No 0.00 Yes. Give specific information..... 0.00 0.00 0.00 54. Add the dollar value of all of your entries from Part 7. Write that number here Part 8: List the Totals of Each Part of this Form 0.00 55. Part 1: Total real estate, line 2 0.00 56. Part 2: Total vehicles, line 5 1,300.00 57. Part 3: Total personal and household items, line 15 200.00 58. Part 4: Total financial assets, line 36 0.00 59. Part 5: Total business-related property, line 45 0.00 60. Part 6: Total farm- and fishing-related property, line 52 0.00 61. Part 7: Total other property not listed, line 54 1,500.00 62. Total personal property. Add lines 56 through 61. 1,500.00 Copy personal property total -> 1,500.00 63. Total of all property on Schedule A/B. Add line 55 + line 62.

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Fill in this in	formation to identify your case:			
Debtor 1	Aubrey L Fox			
Dahlang	First Name Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name Middle Name	Lest Name		
United States E	Bankruptcy Court for the: Northern Distr	rict of Illinois		
Case number (If known)				☐ Check if this is an amended filing
Official F	orm 106C			
Sched	ule C: The Pro	perty You	Claim as Exemp	t 04/16
Using the prope space is neede	erty you listed on Schedule A/B: Pro	pperty (Official Form 106	ogether, both are equally responsible for SA/B) as your source, list the property tha Additional Page as necessary. On the top	t you claim as exempt. If more
•	,			•••
For each item : specific dollar	of property you claim as exempt, amount as exempt. Alternatively	you must specify the vou may claim the fu	amount of the exemption you claim. O	ne way of doing so is to state a
of any applical	ble statutory limit. Some exempti	ons-such as those fo	or health aids, rights to receive certain	benefits, and tax-exempt
			eclaim an exemption of 100% of fair me property is determined to exceed that	
	ed to the applicable statutory am		e property is determined to exceed that	ramount, your exemption
Part 1: Id	entify the Property You Clain	n as Exempt		
1 Which sot	of exemptions are you claiming?	Charle one only aven	if your appropriate file with	
	e claiming state and federal nonbar			·
	e claiming state and rederal normal		(0.5.0. § 522(b)(5)	
	•	• (,(,,		
2. For any pr	operty you list on <i>Schedule A/B</i> t	that you claim as exen	npt, fill in the information below.	
V.5 - 15 (F.W.				eri derana nederande etgeler er edelekter
	cription of the property and line on A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief	. Furniture	e.	_ _ _ \$	735 ILCS 5/12-1001(b)
description	i. I difficule	a	2 100% of fair market value, up to	• •
Line from Schedule /	4/B: <u>6</u>		any applicable statutory limit	
Brief				725 11 00 5/42 4004/5)
description	: Electronics	\$	_ 🛄 \$	735 ILCS 5/12-1001(b)
Line from Schedule	A/B: 7		☑ 100% of fair market value, up to any applicable statutory limit	
Brief description	Clothes	\$	 \$	735 ILCS 5/12 -1001(a)
Line from Schedule A	√B: <u>11</u>		100% of fair market value, up to any applicable statutory limit	
3. Are vou cl	aiming a homestead exemption o	f more than \$160 375?	•	
			es filed on or after the date of adjustment.)
☑ No			•	
	d you acquire the property covered	by the exemption within	1,215 days before you filed this case?	
☐ No				
☐ Ye	S			

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Debtor 1

Aubrey L Fox
First Name Middle Name

Last Name

Case number (if known)_

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ш	ж	• 1		•	4	

Additional Page

Brief descript on Schedule	ion of the property and line A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Brief description:	Deposit of Money	\$ 200.00	□ \$200.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B:	17		■ 100% of fair market value, up to any applicable statutory limit	
Brief description:	***************************************	\$	□ \$	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	· · · · · · · · · · · · · · · · · · ·	e e e e e e e e e e e e e e e e e e e
Line from Schedule A/B:	WANTED COMPANY OF THE PARTY OF		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ s	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description;		\$		
Line from Schedule A/B;			100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<u> </u>	e en
Line from Schedule A/B:	West-Marketon		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		
Line from Schedule A/B:	all Marie Communities		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	***************************************	\$	<u> </u>	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<u> </u>	er e en e
Line from Schedule A/B:	***************************************		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	_ \$	
Line from Schedule A/B:	and the fact of the second		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<u> </u>	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	Q \$	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	

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Fill in this information to identify your c	ase:			
Debtor 1 Aubrey L. Fox				
	lle Name Last Name			
10	lle Name Last Name			
United States Bankruptcy Court for the: Norther	rn District of Illinois			
Case number(If known)			☐ Check	if this is an
				led filing
Official Form 106D				
	rs Who Have Claims Secu	red by Prop	perty	12/15
Be as complete and accurate as possible	e. If two married people are filing together, both are py the Additional Page, fill it out, number the entrie	equally recognished		t
additional pages, write your name and ca	ase number (if known).	s, and attach it to this	form. On the top of	any
Do any creditors have claims secured	by your property?			
No. Check this box and submit this fo	orm to the court with your other schedules. You have no	othing else to report on t	lhis form.	
Yes. Fill in all of the information below	v.			
Part 1: List All Secured Claims				
		Column A	Column B	
2. List all secured claims. If a creditor has	more than one secured claim, list the creditor separate has a particular claim, list the other creditors in Part 2.	Amount of claim	Value of collateral	Column C Unsecured
As much as possible, list the claims in alp	has a particular claim, list the other creditors in Part 2. chabetical order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion
2.1	Describe the property that secures the claim:	\$ 0.00	\$ 0.00	lfany ∊ 0.00
Creditor's Name	Describe the property that secures the claim.	\$ <u> </u>	\$	\$
Number Street	_			
Number Street	As of the date you file, the claim is: Check all that app	Nh.		
	Contingent	лу.		
City State ZIP Code	Unliquidated			
Who owes the debt? Check one.	Disputed			
Debtor 1 only	Nature of lien. Check all that apply.			
Debtor 2 only	 An agreement you made (such as mortgage or secured car loan) 	t		
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit Other (including a right to offset)			
☐ Check if this claim relates to a	Other (including a right to offset)	_		
community debt Date debt was incurred	Last 4 digits of account number			
2.2	Describe the property that secures the claim:	\$ 0	s 0.00 s	0.00
Creditor's Name			9	0100
Number Street	-			
	As of the date you file, the claim is: Check all that appl	 lv.		
	Contingent	,		
City State ZIP Code	Uniliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured)			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
	Other (including a right to offset)			
☐ Check if this claim relates to a community debt		_		
Date debt was incurred	Last 4 digits of account number			
Add the dollar value of your entries in (Column A on this page. Write that number here:	ls of		**************************************

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Debtor 1

Aubrey L. Fox

As of the date you file, the claim is: Check all that apply.	Debtor 1 AUDIEY L. FOX First Name Middle Name	Last Name Case number (# known)						
Describe the property that secures the claim: \$ 0.00 g 0	Part 1: After listing any entries on this	page, number them beginning with 2.3, followed	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion			
As of the date you file, the claim is: Check all that apply. Contingent		Describe the property that secures the claim:	\$0.00	\$ 0.00	0.00			
As of the date you file, the claim is: Check all that apply. Contingent	Creditor's Name							
Contingent Con	Number Street	_						
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 on	City State ZIP Code	Contingent Unliquidated						
Debtor and Debtor 2 city	Who owes the debt? Check one.	Nature of lien. Check all that apply,						
At least one of the debtors and another community debt Date debt was incurred	·	An agreement you made (such as mortgage or secured						
Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Conditions Name Number Street As of the date you file, the claim is: Check all that apply. Contingent Uniquidated Disputed Nature of lien, Check all that apply. An agreement you made (such as mortgage or secured car loan) Check if this claim relates to a community debt Check if this claim relates to a community debt Check if this claim relates to a community debt Check all that apply. Contingent Uniquidated Disputed As of the date you file, the claim is: Check all that apply. An agreement you made (such as mortgage or secured car loan) Check if this claim relates to a community debt Check if this claim relates to a community debt of the date you file, the claim is: Check all that apply. As of the date you file, the claim: Check if this claim relates to a community debt of the date you file, the claim is: Check all that apply. As of the date you file, the claim: Check if this claim relates to a community debt of the date you file, the claim is: Check all that apply. An agreement you made (such as mortgage or secured car loan) Street As of the date you file, the claim is: Check all that apply. An agreement you made (such as mortgage or secured car loan) Street As of the date you file, the claim is: Check all that apply. An agreement you made (such as mortgage or secured car loan) Street Check if this claim relates to a community debt Check if this claim relates to a community debt of the debtors and another car loan. Check if this claim relates to a community debt of the debtors and another car loan. Check if this claim relates to a community debt of the debtors and another car loan. Check if this claim relates to a community debt of the debtor and another car loan. Check if this claim relates to a community debt of the debtor and another car loan. Check if this claim relates to a community debt of the date your entries in Column A on this page. Write that number here: § 0.0								
Check if this claim relates to a community debt	At least one of the debtors and another	0.00)					
Describe the property that secures the claim: Condition's Name		Grandler (including a right to onset)	_					
Creditor's Name Namber Street	Date debt was incurred	Last 4 digits of account number						
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Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number	_							
Check if this claim relates to a community debt Date debt was incurred)					
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Creditor's Name Number Street Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	Date debt was incurred	Last 4 digits of account number						
As of the date you file, the claim is: Check all that apply. City State ZIP Code Unliquidated Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured car loan) Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Disputed Statutory lien from a lawsuit Other (including a right to offset) Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Add the dollar value of your entries in Column A on this page, Write that number here: If this is the last page of your form, add the dollar value totals from all pages.	.00	Describe the property that secures the claim:	s 0.00	s 0.00 s	0.00			
As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only Debtor 2 only Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages.	Creditor's Name		7	V				
City State ZIP Code Unliquidated Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) 0.00 Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages.	Number Street							
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Date debt was incurred Last 4 digits of account number Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages.		Other (including a right to offset) 0.00						
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If this is the last page of your form, add the dollar value totals from all pages. Write that number here:	Add the dollar value of your entries	In Column A on this page. Write that number here:	\$ 0.00					
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Debtor 1

		Doddinon	n 1 ago 20 01 01
Aubrey L.	Fox		Case number (# known)
First Name	Middle Name	Last Name	Case trainiser (# Milown)

Part 2:	List Others to Be	Notified for a Deb	t That You Airead	ly Listed
you have r	u ying to conect from ve	ou for a debt you owe to	o someone else, list t it vou listed in Part 1.	r a debt that you already listed in Part 1. For example, if a collection the creditor in Part 1, and then list the collection agency here. Similarly, if list the additional creditors here. If you do not have additional persons to
				On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
**				
Number	Street			
	THE PARTY OF THE P			_
City		State	7ID C1-	
		State	ZIP Code	
				On which line in Part 1 did you enter the creditor? 0.00
Name				Last 4 digits of account number
Number	Street	**************************************		_
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City		State	ZIP Code	_
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Name				Last 4 digits of account number
				Last 4 digits of account number
Number	Street	***************************************		-
		~~···		_
City		State	ZIP Code	
				On which line in Part 1 did you enter the creditor?
Name	TOTAL MARKET			Last 4 digits of account number
31				_
Number	Street			
			TWW-stra-V	-
City	**************************************	State	ZIP Code	-
				On which line in Part 1 dld you enter the creditor?
Name				Last 4 digits of account number
Number	Street			-
				-
City		State	ZIP Code	
SANC-side the collection and acceptance		TÖNYA CORCUM GASAÇI IN ÇEŞBANA ÇA TÖRANA ÇAR ÇAR ÇAR TÜRÜRÜN TÜRÜRÜN TÜRÜRÜN TÜRÜRÜN TÜRÜRÜN TÜRÜRÜN TÜRÜRÜN T	LANGER AND COMPANY OF THE CONTROL OF	On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street	***************************************		
0:4				
City	መመ ሪክ አ መር-መጀመስ ታመስለ። አስስ መተስስያ እንዚህ መመመያለያ የታቸጠና ይህ የሚመረ ሰላ ነገር	State	ZIP Code	

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Fill in this	information to iden	tify your case:			
Debtor	Aubrey L. Fox				
Debtor 2	First Name	Middle Name	Las! Name		
(Spouse If filing		Middle Name	Last Name		
		he: Northern District of II	linois		
Case numbe (if known)) ************************************				Check if this is an
			W. L		amended filing
Official	Form 106G	_			
Sched	ule G: Exe	cutory Cor	tracts and	Unexpired Leases	12/15
additional pa 1. Doyou ☑ No. (nges, write your nan have any executory Check this box and file	contracts or unexpire	f known). d leases? t with your other schedul	ether, both are equally responsible for sup iber the entries, and attach it to this page. (es. You have nothing else to report on this for	On the top of any
2. List sepa	arately each person , rent, vehicle lease	or company with who	m you have the contrac	sted on Schedule A/B: Property (Official Form at or lease. Then state what each contract on the instruction booklet for more examples of	
Person o	or company with wh	om you have the conti	ract or lease	State what the contract or lease is fo	•
Name					
Number	Street	111111111111111111111111111111111111111	37440		
City		State ZIP Code			
.2					ANNA HITLEN KATI (PERA) BESIA CACOUN HAROLOGIA SALIMBRIN VIII CALLA SALIMBRIN EN SHE KALIMBA
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Debtor 1

			9	
Aubrey	L. Fox			Case number (# known)
First Name	Middle Name	Loet Marno		Care that the fermion of

		Additional F	age if You H	ave More Contracts or Leases	•
	Person	or company v	vith whom you	have the contract or lease	What the contract or lease is for
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<u>'-</u>]	Name				
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and the second second	City		State	ZIP Code	

Case 18-24015 Doc 1 Filed 08/24/18 Entered 08/24/18 16:06:57 Desc Main Page 28 of 61 Document Fill in this information to identify your case: Aubrey Debtor 1 Fox First Name Middle Name Debtor 2 (Spouse, if filing) First Name Middle Name Lasi Name United States Bankruptcy Court for the: Northern District of Illinois Check if this is an Case number (If known) amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). **List All of Your PRIORITY Unsecured Claims** 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☐ Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority Nonpriority amount amount Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government Check if this claim is for a community debt Claims for death or personal injury while you were Is the claim subject to offset? intoxicated ☐ No Other, Specify Yes Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury white you were Check if this claim is for a community debt intoxicated

Official Form 106E/F

No Yes

Is the claim subject to offset?

Other. Specify

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Debtor 1

Aubrey	,
Aubrey	/

r risking any entries on this page, number the	om beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonprior amount
Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply	<i>i</i> .		
	☐ Contingent			
City State ZIP Code	Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only Debtor 1 and Debtor 2 only	☐ Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government			
☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			
is the claim subject to offset?	Other. Specify			
□ No □ Yes				
Priority Creditor's Name	Last 4 digits of account number		**************************************	
	When was the debt incurred?	,		Ψ
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	As of the date you file, the claim is: Check all that apply.			
ity State ZIP Code	☐ Contingent ☐ Unliquidated			
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Who incurred the debt? Check one. Debtor 1 only				
Debtor 2 only	Type of PRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government Claims for death or personal injury while you were			
Check if this claim is for a community debt	intoxicated			
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ority Creditor's Name	Last 4 digits of account number	\$\$		
mber Street	When was the debt incurred?			
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y State ZIP Code	☐ Unliquidated			
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Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only				
Debtor 1 and Debtor 2 only	Domestic support obligations			
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Check if this claim is for a community debt	intoxicated	s an sa matasahkan santanti berataran daka	tika misali kun liba attitun 1909, pag	er to devokate dates a subject of
he claim subject to offset?	Other. Specify			
No				

υe	btor 1	Aubrey First Name Mirrilla Name	L	Docum e ŋ	t Page 30 of 61	
	art 2;	17/10/10	200	t Name	Case number (# known)	
(3/4/2)		List All of Your NON				
э.	₩ No. Y	creditors have nonprior	rity unsecur ort in this part	ed claims against	you? of the court with your other schedules.	
	Yes	to ropo	arin tha part	. Submit this forth to	o the court with your other schedules.	
4.	List all o	f your nonpriority unse	cured claim	s in the alphabetic	cal order of the creditor who holds each claim. If a creditor h	no mana ika
	included	in Part 1. If more than or	he creditor se ne creditor ho	eparately for each colors	cal order of the creditor who holds each claim. If a creditor h claim. For each claim listed, identify what type of claim it is. Do n im, list the other creditors in Part 3.If you have more than three r	as more than one ot list claims alread
	claims fil	out the Continuation Pa	ge of Part 2.	,	not the sales elections in Part 3.11 you have more than three r	onpriority unsecur
1] -:aL -	Market B. A.				Total claim
_		hird Bank y Creditor's Name			Last 4 digits of account number 8 7 1 1	504
	38 For	untain Square Plaza	a		When was the debt incurred? 08/01/2017	\$501.
	Number Cincin	Street nati	ОН	45000		
	City		State	45263 ZIP Code	As of the date you file, the claim is: Check all that apply.	
	100				Contingent	
	Who inc	surred the debt? Check on	10.		Unliquidated	
	Debto				Disputed	
	Debto	or 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
		st one of the debtors and an			☐ Student loans	
		k if this claim is for a co	mmunity deb	t	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	is the cla	nim subject to offset?			Debts to pension or profit-sharing plans, and other similar debt	
	Yes				Other. Specify Banks	
7	Chase	g mar i vizi i maga e stragio cara e e e galego a grazi e e e gazares e iza meta se como a como a como su	Photography and another hope years of a	in Contact Conservation that page to the property of the con-	and the property of the state o	
		Creditor's Name			Last 4 digits of account number 8 7 1 1	\$800.0
	Ро Вох				When was the debt incurred? 01/15/2018	
	Number Wilming	Street				
	City	JION	DE State	19850 ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incu	rred the debt? Check one			Contingent Unliquidated	
	☑ Debtor	1 only			Disputed	
	Debtor	2 only 1 and Debtor 2 only			Type of MONDPIODING	
	At leas	i and Debtor 2 only t one of the debtors and ano	other		l ype of NONPRIORITY unsecured claim: Student loans	
		if this claim is for a com			Obligations arising out of a separation agreement or divorce	
		m subject to offset?	andinty debt		that you did not report as priority claims	
1	Z No				Debts to pension or profit-sharing plans, and other similar debts Other. Specify Banks	
	Yes	in sentiti viitelee – en tätelet mis an entropiitele viiten naivine ja kileen on tiitele kulle paivi	TO THE STREET WAS ARRESTED TO SERVE	e transier werd had het wordstegen an der hier het here dan de haar gestalte de s		
٠.	Tcf			Company Company	Last 4 digits of account number $8 7 1 1$	ang dan satu pangangangan saturan pangan saturan dan saturan saturan saturan saturan saturan saturan saturan s
		reditor's Name Cedar Ave			When was the debt incurred? 03/05/2018	\$900.0
Ñ	lumber	Street	***************************************			
	Apple V	alley	MN	55124	As of the date way 51- day	
	•		State	ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Debtor 1	red the debt? Check one.			☐ Contingent ☐ Unliquidated	
Ę	Debtor 2	? only			☐ Disputed	
		and Debtor 2 only			Type of NONPRIORITY	
		one of the debtors and anoth			Type of NONPRIORITY unsecured claim: Student loans	
		f this claim is for a comn	nunity debt		Obligations arising out of a separation agreement or divorce	
İs	the clain	subject to offset?			triat you did not report as priority claims	
•	∛ No } Yes				Debts to pension or profit-sharing plans, and other similar debts Other. Specify Banks	

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Case 18-24015 Doc 1 Filed 08/24/18 Entered 08/24/18 16:06:57 Document Page 31 of 61 Debtor 1 Part 2 Your NONPRIORITY Unsecured Claims — Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim 4.4 Comcast Last 4 digits of account number 8 7 1 1 \$ 1,000.00 Nonpriority Creditor's Name When was the debt incurred? 04/01/2017 Po Box 3002 Number Street As of the date you file, the claim is: Check all that apply. Southeastern PA 19398 State ZIP Code Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that Check if this claim is for a community debt you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? M Other, Specify Cable Company **2** No Yes 4.5 St. James Hospital Last 4 digits of account number 8 7 1 1 700.00 Nonpriority Creditor's Name When was the debt incurred? 1423 Chicago Road 08/01/2018 As of the date you file, the claim is: Check all that apply. Chicago Heights IL 60411 State ZIP Code Contingent Unliquidated Who incurred the debt? Check one. Disputed **☑** Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that Check if this claim is for a community debt you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other, Specify Hospital Bills **₩** No Yes 4.6 600.00 South Suburban Hospital Last 4 digits of account number 8 7 1 1 Nonpriority Creditor's Name 17800 Kedzie Ave 07/15/2017 When was the debt incurred? Number Street Hazel Crest As of the date you file, the claim is: Check all that apply. H 60429 ZIP Code Contingent Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that Check if this claim is for a community debt you did not report as priority claims

No Yes

Is the claim subject to offset?

Debts to pension or profit-sharing plans, and other similar debts

Other Specify Hospital Bills

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Your NONPRIORITY Unsecured Claims - Continuation Page

Ingalls Hospital Nonpriority Creditor's Name			Last 4 digits of account number 8 7 1 1	\$_5,00
One Ingalls Drive			When was the debt incurred? 08/01/2018	
Number Street Harvey	IL.	60426	As of the date you file, the claim is: Check all that apply.	
City Who incurred the debt? Chec	State k one.	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors ar			☐ Student loans	
			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Check if this claim is for	-		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset			Other. Specify Hospital Bills	
Yes				
Speedy Cash Corporat	rest in the most the record at the most of the control of the cont	ada Calma Standa Billiotha Sen Asimilionen Armilionen Standa (Santia des Santia des Santia des Calmaignes)	Last 4 digits of account number 8 7 1 1	\$ 1,000
Nonpriority Creditor's Name			When was the debt incurred? 06/06/2017	
3527 Ridge Road Number Street				
Wichita	KS	67205	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent Unliquidated	
Who incurred the debt? Chec	k one.		☐ Disputed	
Debtor 1 only			T (MONING COM)	
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors an	d another		 Student loans Obligations arising out of a separation agreement or divorce that 	
☐ Check if this claim is for a	community debt		you did not report as priority claims	
is the claim subject to offset?	•		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Pay Day Loans	
No No				
Yes	ti tidan samah dalah kalandaran dalah kalandaran kalandaran kalandaran kalandaran kalandaran kalandaran kalanda	i orrionnista kij ulmijamija mmjalmija m ja konformija mržičinosio osoboli su kontornista kiji ulmijamija se s		
Heights Auto Worker			Last 4 digits of account number 8 7 1 1	\$ 1,000
Nonpriority Creditor's Name 2127, 13912 S. Torrence Number Street	e Ave		When was the debt incurred? 08/08/2017	
Chicago	IL.	60633	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check	one.		☐ Unliquidated ☐ Disputed	
Debtor 1 only			,	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 onlyAt least one of the debtors and	d another		Student loans	
☐ At least one of the debtors and another ☐ Check if this claim is for a community debt			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
is the claim subject to offset?	· ·		Debts to pension or profit-sharing plans, and other similar debts	
No			Other, Specify Pay Day Loans	

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Your NONPRIORITY Unsecured Claims — Continuation Page

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Sprint Wireless			Last 4 digits of account number 8 7 1 1	4.040
Nonpriority Creditor's Name 6391 Sprint Parkway			When was the debt incurred? 05/11/2017	\$ <u>1,010</u>
Number Street			The same of the sa	
Overland Park	KS State	66251	As of the date you file, the claim is: Check all that apply.	
•		ZIP Code	☐ Contingent ☐ Unliquidated	
Who incurred the debt? Ch	eck one.		Disputed	
Debtor 1 only			a disputed	
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors	/ and conther		☐ Student loans	
			Obligations arising out of a separation agreement or divorce that	
Check if this claim is fo	r a community deb	t	you did not report as priority claims	
Is the claim subject to offse	et?		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Mobile Phone Accounts	
Ø No			Other. Speciny Wildlife Friorite Accounts	
Yes				
districtives and design the state of the sta	tangan kebahasa tangan dalam bahasa tangan bahasa bahasa kebahasa kebahasa kebahasa kebahasa kebahasa kebahasa	gerille energy and have been been been been been been been be	and the first with the street algorithms and the street of	e visit i menta e e e nasce
T-Moblie			Last 4 digits of account number 8 7 1 1	s 1,000.0
Nonpriority Creditor's Name				ş <u>ı,000.</u>
Po Box 53410			When was the debt incurred? 07/01/2017	
Number Street Bellevue	WA	00045	As of the date you file, the claim is: Check all that apply.	
City	VVA State	98015 ZIP Code		
		zir coue	Contingent	
Who incurred the debt? Che	ck one.		Unliquidated Disputed	
Debtor 1 only			■ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors a	nd another		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for	a community debt		you did not report as priority claims	
Is the claim subject to offset			Debts to pension or profit-sharing plans, and other similar debts	
☑ No	•		Other Specify Mobile Phone Accounts	
Yes				
kumatan sa magastan minamenta tampi tahun sa kantan tahun 1992 and 20 ka 1988 ani sampa ani sa sa	e anteninin intringi di distribusioni tipo menerana di tanàna e dalah keri dana keri terbaha	e approved the state of the sta	a Production of the programme security of the security of the contract of the security of the	endin i samat mata kabapatan ka
City Of Chicago Depart	lment Of Finan	ce	Last 4 digits of account number 8 7 1 1	\$_2,000.0
Po Box 4641			When was the debt incurred? 08/01/2017	
Number Street Chicago	i i		As of the date you file, the claim is: Check all that apply.	
City	IL State	60680 ZIP Code		
		zir code	Contingent	
Who incurred the debt? Chec	k one.		☐ Unliquidated ☐ Disputed	
Debtor 1 only			■ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only				
At least one of the debtors an	d another		Student loans Obligations arising out of a consulting	
Check if this claim is for a community debt			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
s the claim subject to offset?	-		Debts to pension or profit-sharing plans, and other similar debts	
No			Other, Specify Tickets	

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st Name	Middle Name	Last Name	Document	Page 34 c

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TOUR NUMPRIURITY Unsecured Claims - Continuation rage

listing any entries on this pa	age, number them	beginning with	n 4.4, followed by 4.5, and so forth.	Total claim
Illinois Tollway Authority			Last 4 digits of account number 8 7 1 1	s 500.00
Nonpriority Creditor's Name 2700 Ogden Avenue			When was the debt incurred? 08/15/2017	
Number Street			As of the date you file, the claim is: Check all that apply.	
Downers Grove	<u>IL</u>	60515		
City Who incurred the debt? Check of Debtor 1 only	State one.	ZIP Code	Contingent Unliquidated Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors and	another		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a c	community debt		you did not report as priority claims	
Is the claim subject to offset?	•		 Debts to pension or profit-sharing plans, and other similar debts Other. Specify Tickets 	
₩ No Yes				
erts, esta resistantification de estatos a seu en especial apenda de especial de especial de especial de la co	thempore to the transfer out observed the major observed as a second	and the second of the second o	ente de l'entre de la respectation de la mande mente des destropt de tre presente de suite de seu de la respect	Solid State of the second
ComeEd			Last 4 digits of account number 8 7 1 1	\$ 2,000.0
Nonpriority Creditor's Name			When was the debt incurred? 07/25/2017	
Po Box 6111			which was the debt incurred?	
Number Street Carol Stream	IL	60197	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
An			☐ Unliquidated	
Who incurred the debt? Check o	one.		☐ Disputed	
Debtor 1 only Debtor 2 only			Tors of MONDROOITY and a second delay	
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors and	another		Student loans	
			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Check if this claim is for a c	community dept		Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset?			Other. Specify Utilities	
☑ No ☑ Yes				
en traditional y tapographia e to half data appair contribution acquaint acquaint per a secondar empression data	and the second of the second o	utem en utemperatus em transforma vontages	eng cikininan ang kakalaga galakang kalan titorak ang anganggal dakaka da 1970 titolah ang angangkangkangkangkang ang kang dalah da 1970 titolah da 1970 titol	s 300.00
Vicor Gas			Last 4 digits of account number 8 7 1 1	*
Nonpriority Creditor's Name			When was the debt incurred? 08/08/2018	
Po Box 5407				
Carol Stream	IL.	60197	As of the date you file, the claim is: Check all that apply.	
Dity	State	ZIP Code	☐ Contingent	
Who incurred the debt? Check of	one.		Unliquidated	
	MG.		☐ Disputed	
Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only				
At least one of the debtors and a	another		 Student loans Obligations arising out of a separation agreement or divorce that 	
Check if this claim is for a c	ommunity debt		you did not report as priority claims	
			Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset? No Yes			☑ Other. Specify Utilities	

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First Name

Middle Name

Part 2: Your NONPRIORITY	•
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Unsecured Claims -- Continuation Page

ter listing any entries on this p	age, number them beginning w	ith 4.4, followed by 4.5, and so forth.	Total claim
Secretary Of State		Last 4 digits of account number 8 7 1 1	s 0.0
Nonpriority Creditor's Name 2701 S. Dirksen Parkwa	v	When was the debt incurred? 08/01/2017	φ
Number Street	Y		
Springfield	IL 62723	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Check Debtor 1 only	State ZIP Code One.	Contingent Unliquidated Disputed	
Debtor 2 only		Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only		☐ Student loans	
At least one of the debtors and	another	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a	community debt	you did not report as priority claims	
Is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts Other, Specify Notice Only	
Yes			
Pelican Auto Finance LL	.C	Last 4 digits of account number 8 7 1 1	\$ 11,648.00
Nonpriority Creditor's Name		When was the debt incurred? 07/23/2015	
Po Box 420848	*************************************	when was the dept incurred?	
Number Street San Diego	CA 92142	As of the date you file, the claim is: Check all that apply.	
City	State ZIP Code	Contingent	
Who incurred the debt? Check	ano.	☐ Unliquidated	
Who incurred the debt? Check of Debtor 1 only	JIIC.	☐ Disputed	
Debtor 2 only		Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only		Student loans	
At least one of the debtors and	another	 Student loans Obligations arising out of a separation agreement or divorce that 	
Check if this claim is for a	ommunity debt	you did not report as priority claims	
Is the claim subject to offset?		 Debts to pension or profit-sharing plans, and other similar debts Other. Specify Automobile 	
No		Other, Specify Automobile	
Yes			
Cook Law Magistrata Pi	chard I Daloy Contor	Last 4 digits of account number 8 7 1 1	_{\$1,600.00}
Cook Law Magistrate, Ri	Unaid 3 Daley Celler		
50 W. Washington Street		When was the debt incurred? 03/24/2017	
Chicago	IL 60602	As of the date you file, the claim is: Check all that apply.	
City	State ZIP Code	Contingent	
Who incurred the debt? Check of	one.	☐ Unliquidated ☐ Disputed	
Debtor 1 only		el Disputed	
Debtor 2 only		Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only		☐ Student loans	
At least one of the debtors and	another	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a c	ommunity debt	you did not report as priority claims	
Is the claim subject to offset?		 Debts to pension or profit-sharing plans, and other similar debts Other. Specify Judgement 	
☑ No ☐ Yes			

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Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

1	Verizon Wireless			Last 4 digits of account number 8 7 1 1	\$ <u> </u>
	Nonpriority Creditor's Name 500 Technology Drive Suite 550			When was the debt incurred? 03/24/2017	-
	Number Street Weldon Spring	МО	63304	As of the date you file, the claim is: Check all that apply.	
	City Who incurred the debt? Check one.	State	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed	
	Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and another	ar.		☐ Student loans	
	Check if this claim is for a comm			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?	unity debt		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Mobile Phone Accounts	
	Yes	0454-0048465460444455448164445	፥ የጀመመሪያ አንላቂ የተመረ የጀመር የመጀመር የመ		
	MCSI Nonpriority Creditor's Name		Aller 1944 - 1944 - 1944 - 1944 - 1944 - 1944 - 1944 - 1944 - 1944 - 1944 - 1944 - 1944 - 1944 - 1944 - 1944 -	Last 4 digits of account number 8 7 1 1	\$_9,000.0
	7330 College Dr.			When was the debt incurred? 03/24/2017	
	Number Street Palos Heights	IL	60463	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check one.			☐ Unliquidated☐ Disputed	
	Debtor 1 only			Total (MONTH)	
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	r		Student loansObligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a comm	unity debt		you did not report as priority claims	
	is the claim subject to offset?	-		 Debts to pension or profit-sharing plans, and other similar debts Other. Specify_Tickets-Park Forrest, Midlothian 	
	☑ No □ Yes				
J.o.	PLS Loan Store	ት የምስባር ቀሳ የቆቀጥ የተመሰቀ የመስተር የተመሰቀ የመስተር የተመሰቀ የመስተር የተመሰቀ የመስተር የተመሰቀ የመስተር የተመሰቀ የመስተር የተመሰቀ የመስተር የተመሰቀ የመሰ	rtikalistandiarya miai barka sensiikaliya n kiiriqii isay siakkay ita, ara artiina qaraanaa a	Last 4 digits of account number 8 7 1 1	\$ <u>1,500.0</u>
	Nonpriority Creditor's Name			00/04/0047	
	3175 175TH St B Number Street			When was the debt incurred? U3/24/2017	
	Hazel Crest	IL.	60429	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed	
	Debtor 1 only			a Dispated	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt			☐ Student loans	
				Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?	y asst		Debts to pension or profit-sharing plans, and other similar debts	
	No			☑ Other, Specify Pay Day Loans	
	☑ Yes				

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Debtor 1

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Your NONPRIORITY Unsecured Claims — Continuation Page

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Credit Collection			Last 4 digits of account number 8 7 1 1	s 181
Nonpriority Creditor's Name Po Box 447	•		When was the debt incurred? 03/24/2017	T
Number Street Norwood	MA	02062	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the del	ht? Check one		Unliquidated	
Debtor 1 only	or onedit one.		☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor	r 2 only		Student loans	
At least one of the d	ebtors and another		Obligations arising out of a separation agreement or divorce that	
Check if this clain	n is for a community debt		you did not report as priority claims	
is the claim subject to	-		Debts to pension or profit-sharing plans, and other similar debts	
M No	w withwas		✓ other. Specify Commonwealth Edison	
☐ Yes				
and the second and th	da y ang minering mineraga a minada meraka kelala mengang mengang mengangkan kelala mengangkan kelala mengangk	en. Mit Australië (17 vetat stremuns, en 1994)	Local Administration of the control	4.000
Enhanced Recov Nonpriority Creditor's Name	ery		Last 4 digits of account number 8 7 1 1	\$ <u>1,390</u>
Po Box 57547			When was the debt incurred? 03/24/2017	
Jacksonville	FL	32241	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
NAME - 1			Unliquidated	
Who incurred the deb	ot? Check one.		☐ Disputed	
Debtor 1 only Debtor 2 only			T FMGMPNPNPNPNPNPNPNPNPNPNPNPNPNPNPNPNPNPNP	
Debtor 1 and Debtor	2 only	*	Type of NONPRIORITY unsecured claim:	
At least one of the de			Student loans Obligations arising out of a separation agreement or divorce that	
Chack if this claim	is for a community debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
			Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to Mo	o offset?		☑ Other. Specify At&t	
Yes	tin a wakisi terampata pewakasang sakelulah sa dilah sakip i saki katibola ali pilikulah ili.	in matter called the monaching contents in some	notaeren bestillen er eneme met 12 ekt ektorioù eur bestillen van de katorioù en given en de enemen en en en e En enemen en	. Control to the Control
			Last 4 digits of account number	\$
Nonpriority Creditor's Name			When was the debt incurred?	
Number Street			As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt	t? Check one,		Unliquidated	
Debtor 1 only			☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2	2 only		Student loans	
At least one of the del	btors and another		Obligations arising out of a separation agreement or divorce that	
Check if this claim	is for a community debt		you did not report as priority claims	
is the claim subject to	_		Debts to pension or profit-sharing plans, and other similar debts	
□ No □ Yes			Other. Specify	

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Debtor 1

Docu**m**⊛nt

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7 4		
	1117	

List Others to Be Notified About a Debt That You Already Listed

partition of the state of the s	have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the ersons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number
City State ZIP Code	
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
earne	
lumber Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
	Claims Claims
State ZIP Code	Last 4 digits of account number
ame	On which entry in Part 1 or Part 2 did you list the original creditor?
ane	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
humber Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
ity State ZiP Code	Last 4 digits of account number
ame	On which entry in Part 1 or Part 2 did you list the original creditor?
ante	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
umber Street	☐ Part 2: Creditors with Nonpriority Unsecured
	Claims
ty State ZIP Code	Last 4 digits of account number
ame	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
imber Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
ly State ZIP Code	Last 4 digits of account number
A SAMELY	On which entry in Part 1 or Part 2 did you list the original creditor?
rme	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
mber Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
y State ZIP Code	Last 4 digits of account number
me	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
mber Street	

State

ZIP Code

Last 4 digits of account number

Debtor 1

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Docurfient Page 39 of a 6-1 aumber (if known)

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims	6a	Domestic support obligations	6a.	\$0.00
from Part 1	6b	Taxes and certain other debts you owe the government	6b.	\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6 d.	+\$0.00
	6e.	Total. Add lines 6a through 6d.	6e.	s0.00
				Total claim
Total claims	6f.	Student loans	6f.	\$ 0.00
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$ 44,130.00
	6j. ʻ	Total. Add lines 6f through 6i.	6j.	s44,130.00

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Fill in this	information to ide	ntify your case:	
Debtor 1	Aubrey L. Fo	×	
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filir	ng) First Name	Middle Name	Last Name
United State	s Bankruptcy Court for	the: Northern District of II	inois
Case numbe	er		
			44444

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

Do you !	nave any codebtors? (If y	ou are filing a joint case, do no	t list either spouse a	is a codebtor.)
☐ Yes				
Within ti Arizona,	he last 8 years, have you California, Idaho, Louisian	lived in a community propert a, Nevada, New Mexico, Puert	ty state or territory o Rico, Texas, Wasi	? (Community property states and territories include hington, and Wisconsin.)
	Go to line 3.			•
Yes.	Did your spouse, former s	pouse, or legal equivalent live v	with you at the time?	,
M	lo			
☐ Y	es. In which community st	ate or territory did you live?	······································	. Fill in the name and current address of that person.
Ī	Name of your spouse, former spous	e, or legal equivalent		
ī	Number Street			
_				
C	City	State	ZIP Code	
Schedul Schedul	e D (Official Form 106D), e E/F, or Schedule G to fi	Schedule E/F (Official Form	arantor or cosigne 106E/F), or <i>Schedu</i>	r. Make sure you have listed the creditor on lie G (Official Form 106G). Use <i>Schedule D,</i>
Schedui Schedui Column	e D (Official Form 106D),	Schedule E/F (Official Form	arantor or cosigne 106E/F), or <i>Schedu</i>	ile G (Official Form 106G). Use Schedule D,
Schedul Schedul Column	e D (Official Form 106D), e E/F, or Schedule G to fi	Schedule E/F (Official Form	arantor or cosigne 106E/F), or <i>Schedu</i>	ile G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the deb Check all schedules that apply:
Schedui Schedui Column	e D (Official Form 106D), e E/F, or Schedule G to fi	Schedule E/F (Official Form	arantor or cosigne 106E/F), or <i>Schedu</i>	Column 2: The creditor to whom you owe the deb
Schedul Schedul Column	e D (Official Form 106D), e E/F, or Schedule G to fi	Schedule E/F (Official Form	arantor or cosigne 106E/F), or <i>Schedu</i>	ile G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the det Check all schedules that apply:
Schedule Schedule Column	e <i>D</i> (Official Form 106D), e <i>E/F, or Schedule G</i> to fi <i>1:</i> Your codebtor	Schedule E/F (Official Form	106E/F), or Schedu	Column 2: The creditor to whom you owe the det Check all schedules that apply: Schedule D, line Schedule E/F, line
Scheduli Scheduli Column	e <i>D</i> (Official Form 106D), e <i>E/F, or Schedule G</i> to fi <i>1:</i> Your codebtor	Schedule E/F (Official Form ' li out Column 2.	arantor or cosigned 106E/F), or <i>Schedu</i> ZIP Code	Column 2: The creditor to whom you owe the deb Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line
Scheduli Scheduli Column Name Number	e <i>D</i> (Official Form 106D), e <i>E/F, or Schedule G</i> to fi <i>1:</i> Your codebtor	Schedule E/F (Official Form ' li out Column 2.	106E/F), or Schedu	Column 2: The creditor to whom you owe the deb Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line
Scheduli Scheduli Column Name Number City Name	e D (Official Form 106D), e E/F, or Schedule G to fi 1: Your codebtor Street	Schedule E/F (Official Form ' li out Column 2.	106E/F), or Schedu	Column 2: The creditor to whom you owe the deb Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line Schedule E/F, line
Schedule Schedule Column Name Number City	e <i>D</i> (Official Form 106D), e <i>E/F, or Schedule G</i> to fi <i>1:</i> Your codebtor	Schedule E/F (Official Form ' li out Column 2.	106E/F), or Schedu	Column 2: The creditor to whom you owe the deb Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line
Scheduli Scheduli Column Name Number City Name	e D (Official Form 106D), e E/F, or Schedule G to fi 1: Your codebtor Street	Schedule E/F (Official Form ' li out Column 2.	106E/F), or Schedu	Column 2: The creditor to whom you owe the det Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line
Scheduli Scheduli Column Name Number City Name	e D (Official Form 106D), e E/F, or Schedule G to fi 1: Your codebtor Street	Schedule E/F (Official Form ' li out Column 2. State	ZIP Code	Column 2: The creditor to whom you owe the deb Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line Schedule E/F, line Schedule E/F, line Schedule E/F, line
Scheduli Scheduli Column Name Number City Name	e D (Official Form 106D), e E/F, or Schedule G to fi 1: Your codebtor Street	Schedule E/F (Official Form ' li out Column 2. State	ZIP Code	Column 2: The creditor to whom you owe the deb Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule D, line Schedule D, line
Schedule Schedule Column Name Number City Name Number City Name	e D (Official Form 106D), e E/F, or Schedule G to fi 1: Your codebtor Street	Schedule E/F (Official Form ' li out Column 2. State	ZIP Code	Column 2: The creditor to whom you owe the deb Check all schedules that apply: Schedule D, line Schedule E/F, line
Schedule Schedule Column Name Number Gity Name Number Gity	e D (Official Form 106D), e E/F, or Schedule G to fi 1: Your codebtor Street	Schedule E/F (Official Form ' li out Column 2. State	ZIP Code	Column 2: The creditor to whom you owe the deb Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule G, line Schedule D, line

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Debtor 1

Aubrey	L.	Fox		
Circl blaces		5 6' L st	4.	_

Last Name

Case number (if known)_

Column	1: Your codebtor			Column 2: The creditor to whom you owe	the debt
				Check all schedules that apply:	
Name				Schedule D, line	
				Schedule E/F, line	
Number	Street			Schedule G, line	
City		State -	ZIP Code		
					Print Contract with minimum of maga-
Name	· · · · · · · · · · · · · · · · · · ·			Schedule D, line	
-				☐ Schedule E/F, line	
Number	Street			☐ Schedule G, line	
City		State	ZIP Code	and the state of t	······································
Name				Schedule D, line	
				☐ Schedule E/F, line	
Number	Street		· · · · · · · · · · · · · · · · · · ·	Schedule G, line	
City		State	ZiP Code		
		The second secon			and a second second second second second second second second second second second second second second second
Name				Schedule D, line	
				☐ Schedule E/F, line	
Number	Street			Schedule G, line	
City		State	ZIP Code		
Name			**************************************	_ Schedule D, line	
				☐ Schedule E/F, line	
Number	Street		**************************************	Schedule G, line	
City		State	ZIP Code		
Name		**************************************		_ ☐ Schedule D, line	and the state of t
14amo				Schedule E/F, line	
Number	Street			Schedule G, line	
City		State	ZIP Code	•	
		and the control of the state of			****
Name				Schedule D, line	
Number	Street			Schedule E/F, line	
~				-	
City		State	ZIP Code	. The control of the	amente mente de la companyación de la companyación de la companyación de la companyación de la companyación de
Name		,		Schedule D, line	
				☐ Schedule E/F, line	
Number	Street			Schedule G, line	- Properties
City		State			

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Fill in this information to identify	y your case:					
Debtor 1 Aubrey L. F	-ox					
First Name Debtor 2	Middle Name	Last Name				·
(Spouse, if filling) First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:	Northern District of Illinois					
Case number(If known)				Check if t	his is:	
					nended filing	
Official Forms 4001					plement showing po e as of the following	stpetition chapter 13 date:
Official Form 106I				MM / E	DD / YYYY	
Schedule I: You	ur Income					12/15
supplying correct information. If y if you are separated and your spot separate sheet to this form. On the Part 1: Describe Employm	use is not filing with you, e e top of any additional pag	do not include in	iformation abo	uit vour sno	use if more enace is	needed attach a
Fill in your employment information.		Debtor 1			Debtor 2 or non-	filing spouse
If you have more than one job, attach a separate page with						
information about additional employers.	Employment status	☑ Employed ☑ Not employ	ved		☐ Employed ☐ Not employed	
Include part-time, seasonal, or		— Not onlylo	yeu		□ Not employed	TO THE STATE OF TH
self-employed work.	Occupation	Assembly				
Occupation may include student or homemaker, if it applies.	Occupation				**************************************	
	Employer's name	Ford Motor C	Company	· · · · · · · · · · · · · · · · · · ·		
	Employer's address	12600 S Torr	rence			
		Number Street			Number Street	
		**************************************				***************************************
		Chicago	1L	60633		1
		City	State ZIP C	ode	City	State ZIP Code
	How long employed ther	e? <u>5 yr</u>	-		<u>5 yr</u>	WY VALUE OF THE PARTY OF THE PA
Part 2: Give Details About	Monthly Income					
Estimate monthly income as of spouse unless you are separated.	the date you file this form	. If you have noth	ing to report for	any line, wri	te \$0 in the space. Inc	ude your non-filing
If you or your non-filing spouse ha below. If you need more space, at	ave more than one employer ttach a separate sheet to thi	r, combine the info s form.	ormation for all	employers fo	r that person on the lin	es
			For	Debtor 1	For Debtor 2 or non-filing spouse	
List monthly gross wages, sala deductions). If not paid monthly,	ary, and commissions (bef calculate what the monthly	ore all payroll wage would be.	2. <u>\$ 4,</u>	764.00	\$	PER TRANSPORTE
3. Estimate and list monthly over	time pay.		3. +\$	0.00	+ \$	ONTENDO AL
4. Calculate gross income. Add lin	ne 2 + line 3.		4. \$ 4,	764.00	\$	77777000

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Debtor 1 Aubrey L. Fox
First Name Middle Name Last Name

Case number (if known)

		F	or Debtor 1		For Debt	or 2 or I spouse		
Copy line 4 here	→ 4.	\$_	4,764.00		\$			
5. List all payroll deductions:								
5a. Tax, Medicare, and Social Security deductions	5a.	\$	676.00		\$			
5b. Mandatory contributions for retirement plans	5b.	T-	0.00	,	\$			
5c. Voluntary contributions for retirement plans	5c.	\$	0.00	•				
5d. Required repayments of retirement fund loans	5d.	\$_	0.00					
5e. Insurance	5e.	\$	0.00					
5f. Domestic support obligations	5f.	\$_	0.00					
5g. Union dues	5g.	\$_	50.00					
5h. Other deductions. Specify:	5g. 5h.	+\$	0.00	4	- s			
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h	. 6.	\$	751.00		\$	· · · · · · · · · · · · · · · · · · ·		
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	4,013.00		\$			
8. List all other income regularly received:								
8a. Net income from rental property and from operating a business, profession, or farm								
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00		\$			
8b. Interest and dividends	8b.	\$	0.00		\$			
8c. Family support payments that you, a non-filing spouse, or a dependence regularly receive	ent				-			
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$_	0.00		\$			
8d. Unemployment compensation	8d.	\$	0.00		\$			
8e. Social Security	8e.	\$	0.00		\$			
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	nce							
Specify:	8f.	\$	0.00		\$			
8g. Pension or retirement income	8g.	\$	0.00		\$	·		
8h. Other monthly income. Specify:	8h.	+\$	0.00	-	- \$			
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$_	0.00		\$			
 Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 	10.	\$	4,013.00	+	\$	0.00	= \$	40.13
 State all other regular contributions to the expenses that you list in Scheol Include contributions from an unmarried partner, members of your household, your friends or relatives. 			ents, your roor	nmat	es, and ot	her		
Do not include any amounts already included in lines 2-10 or amounts that are	not av	ailable	to pay expen	ses li	sted in Sc	hedule J.		
Specify:						11. 🕇	• \$	0.00
 Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain S 	result Statistic	is the	combined mor	nthiy pplie:	income.	12.	\$	4,013.00
			,					bined
13. Do you expect an increase or decrease within the year after you file this f	orm?						HUN	thly income
☐ Yes. Explain:								

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		· · · · · · · · · · · · · · · · · · ·		
Fill in this information to identify your case:				
Debtor 1 Aubrey L. Fox First Name Middle Name	Last Name	Check if this is:		
Debtor 2		An amended	filina	
(Spouse, if filing) First Name Middle Name	Last Name	A supplement	showing post	petition chapter 13
United States Bankruptcy Court for the: Northern District of	of Illinois	expenses as	of the following	g date:
Case number (if known)		MM / DD / YYY	Y	
Official Form 106J				
Schedule J: Your Expe	nses			12/15
Be as complete and accurate as possible. If two mainformation. If more space is needed, attach anothe (if known). Answer every question.				
Part 1: Describe Your Household				
1. Is this a joint case?				
No. Go to line 2. Yes. Does Debtor 2 live in a separate househo	old?			
No				
☐ Yes. Debtor 2 must file Official Form 106	3J-2, Expenses for Separate	Household of Debtor 2.		
2. Do you have dependents?	Depen	dent's relationship to	Dependent's	Does dependent live
		1 or Debtor 2	age	with you?
Do not state the dependents'	son		18	☑ No ☐ Yes
	son		19	No □ Yes
	girl		10m	☐ No
	911		<u>IVIII</u>	Yes
	***************************************	7444-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		□ No
				⊔ Yes □ No
				Yes
3. Do your expenses include expenses of people other than yourself and your dependents?				
то выстроит выполняем на положения в достов достов на постоя на по	and admittigation of inflictation for the minimum in the Americanist State Sta	от на поставления на наставления на в наст ави на поставите на поставите на постави те на наставите на наставите на поставите на поста	THE RESERVE OF THE PARTY AND ADDRESS OF THE PA	Amplement A. o the other of a solicine. The construction account control and a solicine account accoun
Part 2: Estimate Your Ongoing Monthly Exp				
Estimate your expenses as of your bankruptcy filing expenses as of a date after the bankruptcy is filed. It applicable date.				
Include expenses paid for with non-cash governmen	it assistance if you know t	he value of	andria de Parla de	en e a frincia a Ali
such assistance and have included it on Schedule I:	Your Income (Official Form	n 106l.)	Your exper	ises
 The rental or home ownership expenses for your any rent for the ground or lot. 	residence. Include first mor	tgage payments and 4.	\$	1,000.00
If not included in line 4:				
4a. Real estate taxes		4a.	\$	0.00
4b. Property, homeowner's, or renter's insurance		4b.	\$	0.00
4c. Home maintenance, repair, and upkeep expen-		4c.	\$	0.00
4d. Homeowner's association or condominium due	s	4d.	\$	0.00

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Debtor 1 Aubrey L. Fox Case number (if known) Case number (if known)

			Your e	xpenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6.	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	300.00
	6b. Water, sewer, garbage collection	6b.	\$	30.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	260.00
	6d. Other. Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies	7.	\$	400.00
8.	Childcare and children's education costs	8.	\$	1,200.00
9.	Clothing, laundry, and dry cleaning	9.	\$	200.00
10.	Personal care products and services	10.	\$	120.00
11,	Medical and dental expenses	11.	\$	0.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$	240.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	40.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	160.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20, Specify:	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	0.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other, Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	Other payments you make to support others who do not live with you. Specify: Child Suport to kids	19.	\$	200.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	e.		
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00

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Debtor 1	Aubrey L. Fox First Name Middle Name Last Name Case num	ber (if known)		4
21. Other.	Specify:	21.	+\$	0.00
22. Calcula	te your monthly expenses.			
22a. Ad	d lines 4 through 21.	22a.	 \$	3,910.00
22b. Co	by line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$	0.00
22c. Add	l line 22a and 22b. The result is your monthly expenses.	22c.	\$	3,910.00
23. Calculate	your monthly net income.			
23a. Co	by line 12 (your combined monthly income) from Schedule I.	23a.	\$	4,013.00
23b. Co	by your monthly expenses from line 22c above.	23b.	- \$	3,910.00
	otract your monthly expenses from your monthly income. e result is your <i>monthly net income</i> .	23c.	\$	103.00
	xpect an increase or decrease in your expenses within the year after you file this for ole, do you expect to finish paying for your car loan within the year or do you expect your	m?		
mortgage	payment to increase or decrease because of a modification to the terms of your mortgage	?		
☑ No. ☐ Yes.	Explain here:	over the section of t		
				de reconstruit a signal plus alproprie

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Il in this information to identify your case:		
ebtor 1 Aubrey L. Fox First Name Middle Name	Last Name	
pouse, if filing) First Name Middle Name	Last Name	
ted States Bankruptcy Court for the: Northern District of Illi	nois	
e number nown)		
		Check if this is amended filing
Official Form 106Dec		
	ndividual Debtor's Schedule	S 12/45
		12/30
	ually responsible for supplying correct information. y schedules or amended schedules. Making a false statement, co	
	with a bankruptcy case can result in fines up to \$250,000, or imp 1.	orisonment for up to 20
Sign Below Did you pay or agree to pay someone who is NO		prisonment for up to 20
Sign Below Did you pay or agree to pay someone who is NO	1.	· · · · · · · · · · · · · · · · · · ·
Sign Below Did you pay or agree to pay someone who is NO	T an attorney to help you fill out bankruptcy forms? Attach Bankruptcy Petition Preparer's Notice, I	
Sign Below Did you pay or agree to pay someone who is NO Yes. Name of person Under penalty of perjury, I declare that I have rea	T an attorney to help you fill out bankruptcy forms? Attach Bankruptcy Petition Preparer's Notice, I	
Sign Below Did you pay or agree to pay someone who is NO Yes. Name of person	T an attorney to help you fill out bankruptcy forms? Attach Bankruptcy Petition Preparer's Notice, L Signature (Official Form 119).	· · · · · · · · · · · · · · · · · · ·
Sign Below Sign Below Did you pay or agree to pay someone who is NO No Yes. Name of person Under penalty of perjury, I declare that I have reathat they are true and correct.	T an attorney to help you fill out bankruptcy forms? Attach Bankruptcy Petition Preparer's Notice, E Signature (Official Form 119). d the summary and schedules filed with this declaration and	
Sign Below Sign Below Did you pay or agree to pay someone who is NO No Yes. Name of person Under penalty of perjury, I declare that I have reathat they are true and correct.	T an attorney to help you fill out bankruptcy forms? Attach Bankruptcy Petition Preparer's Notice, I Signature (Official Form 119).	·
Sign Below Sign Below Did you pay or agree to pay someone who is NO No Yes. Name of person Under penalty of perjury, I declare that I have reathat they are true and correct.	T an attorney to help you fill out bankruptcy forms? Attach Bankruptcy Petition Preparer's Notice, E Signature (Official Form 119). d the summary and schedules filed with this declaration and	

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Fill in t	his information	on to identify	your case:			
Debtor 1	Aubrai	L. Fox		**************************************		
Debtor 2	First Name		Middle Name	Last Nam		
	f filing) First Name		Middle Name	Last Nam	· · · · · · · · · · · · · · · · · · ·	
United S	tates Bankrupto	y Court for the:	Northern District o	f Illinois		
Case nu (If known						☐ Check if this is a
		7.4.4.18.18.12.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	1749 His 181 have	- 94 6 W 4 4 5 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		amended filing
Offici	al Form	107				
State	ement o	of Finar	ncial Affai	irs for In	dividuals Filing for I	Bankruptcy 04/
2. Durin	t is your current farried Not married ag the last 3 y	ent marital st vears, have yo	atus? ou lived anywhere	e other than who	re You Lived Before ere you live now? clude where you live now.	
	Debtor 1:			Dates Debto lived there	r 1 Debtor 2:	Dates Debtor 2 lived there Same as Debtor
	Number S	treet	Miller and a company of the second of the se	From	Number Street	From
	realiber C	0.001		То	Number Street	То
						
	City		State ZIP Code	energy and the second of the second		ate ZIP Code
					☐ Same as Debtor 1	Same as Debtor
		****		From		From
	Number S	treet		То	Number Street	То
				_		ATTAINT AND A STATE OF THE STAT
	City		State ZIP Code	-	City Sta	ate ZIP Code
state:	s and territorie o	s include Ariz	ever live with a sona, California, Ida	ho, Louisiana, N	evada, New Mexico, Puerto Rico, Texa	state or territory? (Community property as, Washington, and Wisconsin.)

Part 2:

Explain the Sources of Your Income

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otor 1 Aubrey L. For			Case	number (if known)	
First Name Midd	dle Name Last	Name			10.75.44
Did you have any income Fill in the total amount of i If you are filing a joint case	income you received	i from all jobs and all bus	sinesses, including part-	ar or the two previous cal time activities. der Debtor 1.	lendar years?
□ No					
Yes. Fill in the details.		TENTO CENTRAL CONTROL	opping Section (authorized by a common the section of the common and accommon and accommon ac	A-A	
		Debtor 1		Debtor 2	
		Sources of Income Check all that apply.	Gross Income (before deductions and exclusions)	Sources of income Check all that apply.	Gross Income (before deductions an exclusions)
From January 1 of c the date you filed for		Wages, commissions, bonuses, tipsOperating a business	\$40,493.00	Wages, commissions, bonuses, tips Operating a business	\$
		*·····································			
For last calendar yea		Wages, commissions, bonuses, tips	\$ 50,240.00	Wages, commissions, bonuses, tips	\$
(January 1 to Decemb	per 31, <u>2016</u>) YYYY	Operating a business		Operating a business	V
For the calendar yea	ir before that:	☑ Wages, commissions,	the contraction of the State Company on Assets of the	☐ Wages, commissions,	der mennem general en er er er en en en en
(January 1 to Decemb		bonuses, tips Operating a business	\$62,840.00	bonuses, tips Operating a business	\$
include income regardless unemployment, and other p gambling and lottery winnin	of whether that inco public benefit payme ngs. If you are filing a	me is taxable. Examples ents; pensions; rental inc a joint case and you have	of other income are ali ome; interest; dividends e income that you recei	mony; child support; Social ; money collected from law ved together, list it only once at you listed in line 4	suits: rovalties: and
nclude income regardiess unemployment, and other particularly winning and lottery winning and the grack to source and the grack No	r income during thi of whether that inco public benefit payme ngs. If you are filing	me is taxable. Examples ents; pensions; rental inc a joint case and you have	of other income are ali ome; interest; dividends e income that you recei	; money collected from law ved together, list it only once	suits: rovalties: and
Include income regardless unemployment, and other particularly winning and lottery winning and the grack the grack No	r income during thi of whether that inco public benefit payme ngs. If you are filing	me is taxable. Examples ents; pensions; rental inc a joint case and you have	of other income are ali ome; interest; dividends e income that you recei	; money collected from law ved together, list it only once	suits: rovalties: and
nclude income regardless inemployment, and other particularly winning and lottery winning is each source and the graph No	r income during thi of whether that inco public benefit payme ngs. If you are filing	me is taxable. Examples ents; pensions; rental inc a joint case and you hav ich source separately. Di	of other income are ali ome; interest; dividends e income that you recei	; money collected from laws ved together, list it only once at you listed in line 4.	suits; royalties; and e under Debtor 1. Gross Income from each source
nclude income regardless inemployment, and other particles in the grandling and lottery winning ist each source and the grandless. Yes. Fill in the details.	r income during thi of whether that inco public benefit payme ngs. If you are filing a ross income from ea	ome is taxable. Examples ents; pensions; rental including a joint case and you have the source separately. Department of the source separately. Department of the sources of income Describe below.	Gross income from each source (before deductions and	; money collected from laws ved together, list it only once at you listed in line 4. Debtor 2 Sources of Income	suits; royalties; and e under Debtor 1. Gross Income from each source (before deductions and
nclude income regardless inemployment, and other particularly winning and lottery winning is each source and the graph No	r income during thi of whether that inco public benefit paymengs. If you are filing a ross income from ea	ome is taxable. Examples ents; pensions; rental including a joint case and you have the source separately. Department of the source separately. Department of the sources of income Describe below.	Gross income from each source (before deductions)	; money collected from laws ved together, list it only once at you listed in line 4. Debtor 2 Sources of Income	suits; royalties; and e under Debtor 1. Gross Income from each source (before deductions and
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nclude income regardless inemployment, and other pambling and lottery winning. Ist each source and the grand No. Yes. Fill in the details. From January 1 of cuthe date you filed for	r income during thi of whether that inco public benefit payme ngs. If you are filing a ross income from ea	ome is taxable. Examples ents; pensions; rental including a joint case and you have the source separately. Department of the source separately. Department of the sources of income Describe below.	Gross income from each source (before deductions and exclusions) \$\begin{array}{c} \text{Gross income from each source} \text{(before deductions and exclusions)} \end{array}	; money collected from laws ved together, list it only once at you listed in line 4. Debtor 2 Sources of Income	suits; royalties; and e under Debtor 1. Gross Income from each source (before deductions and
nclude income regardless inemployment, and other pambling and lottery winning ist each source and the gradient No Yes. Fill in the details. From January 1 of cu	r income during this of whether that incorpublic benefit paymengs. If you are filing a ross income from each of the composition	ome is taxable. Examples ents; pensions; rental including a joint case and you have the source separately. Department of the source separately. Department of the sources of income Describe below.	Gross income from each source (before deductions) \$\begin{array}{c} \text{Gross income from each source} \text{(before deductions and exclusions)} \end{array}	; money collected from laws ved together, list it only once at you listed in line 4. Debtor 2 Sources of Income	suits; royalties; and e under Debtor 1. Gross Income from each source (before deductions and
nclude income regardless inemployment, and other pambling and lottery winning ist each source and the graph No Yes. Fill in the details. From January 1 of cuthe date you filed for the date you filed for For last calendar year.	r income during this of whether that incorpublic benefit paymengs. If you are filing a ross income from each of the composition	ome is taxable. Examples ents; pensions; rental including a joint case and you have the source separately. Department of the source separately. Department of the sources of income Describe below.	Gross income from each source (before deductions) \$\begin{array}{c} \text{Gross income from each source} \\ \text{(before deductions and exclusions)} \end{array}	; money collected from laws ved together, list it only once at you listed in line 4. Debtor 2 Sources of Income	suits; royalties; and e under Debtor 1. Gross Income from each source (before deductions and
include income regardless unemployment, and other parabiling and lottery winning. Ist each source and the gradient of the details. From January 1 of cuthe date you filed for For last calendar year (January 1 to December	r income during this of whether that incorpublic benefit paymengs. If you are filing a ross income from each of the composition	ome is taxable. Examples ents; pensions; rental including a joint case and you have the source separately. Department of the source separately. Department of the sources of income Describe below.	Gross income from each source (before deductions and exclusions) \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00	; money collected from laws ved together, list it only once at you listed in line 4. Debtor 2 Sources of Income	Gross Income from each source (before deductions and exclusions) \$
unemployment, and other grambling and lottery winning. List each source and the gramble of the control of the details. From January 1 of cuthe date you filed for for last calendar year.	r income during this of whether that incorpublic benefit paymengs. If you are filing a ross income from each of the composition	ome is taxable. Examples ents; pensions; rental including a joint case and you have the source separately. Department of the source separately. Department of the sources of income Describe below.	Gross income from each source (before deductions) \$\begin{array}{c} \text{Gross income from each source} \text{(before deductions and exclusions)} \end{array}	; money collected from laws ved together, list it only once at you listed in line 4. Debtor 2 Sources of Income	suits; royalties; and e under Debtor 1. Gross Income from each source (before deductions and

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	First Name Middle Name Last Name			Case III	ımber (if known)	
rt 3:	List Certain Payments You Made Be	fore You Filed	for Bankrup	tcy		
	ther Debtor 1's or Debtor 2's debts primarily					
∟l No.	Neither Debtor 1 nor Debtor 2 has primar "incurred by an individual primarily for a per During the PO doug before you filed for beat	sonal, family, or he	ousehold purp	ose."		101(8) as
	During the 90 days before you filed for bank	rruptcy, did you pa	y any creditor	a total of \$	6,425* or more?	
	☑ No. Go to line 7.					
	☐ Yes. List below each creditor to whom y total amount you paid that creditor. child support and alimony. Also, do * Subject to adjustment on 4/01/19 and ever	Do not include pa not include paym	yments for do ents to an atto	mestic sup rney for th	port obligations, such a is bankruptcy case.	s
☑ Yes	s. Debtor 1 or Debtor 2 or both have primar				·	
_ ,	During the 90 days before you filed for bank			a total of \$	600 or more?	
	☑ No. Go to line 7.		, . ,	-, ,		
	Yes. List below each creditor to whom you creditor. Do not include payments falimony. Also, do not include payments.	or domestic suppo	rt obligations.	such as ch	nild support and	
		i de la company de la company de la company de la company de la company de la company de la company de la comp	<u>gernyay</u> kantonka	en en en en en en en en en en en en en e	t den menter bestellte de se een te	Ngjali njavitanjava sejara jenanja na n
		Dates of payment	Total amount	paid	Amount you still owe	Was this payment for
				0.00		
			•	111111	_	
	Creditor's Name		\$	0.00	\$	
	Creditor's Name	<u> </u>	\$	0.00	\$	Car
	Creditor's Name Number Street		\$	0.00	\$	Car Credit card
			\$	0.00	\$	Car Credit card Loan repayment
			\$	0.00	\$	☐ Car☐ Credit card☐ Loan repayment☐ Suppliers or vendo
			\$	0.00	\$	Car Credit card Loan repayment
	Number Street		\$	0.00		Car Credit card Loan repayment Suppliers or vendor
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	Number Street City State ZIP Code Creditor's Name		\$\$	- Arte Arte		Car Credit card Loan repayment Suppliers or vendo Other Mortgage Car Credit card Loan repayment
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	Number Street City State ZiP Code Creditor's Name Number Street		\$\$\$\$\$	- Arte Arte	\$	Car Credit card Loan repayment Suppliers or vendo Other Mortgage Car Credit card Loan repayment Suppliers or vendor Other Mortgage
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Aubrey L. Fox

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nsiders include your relatives; any general partners; ro orporations of which you are an officer, director, pers gent, including one for a business you operate as a s uch as child support and alimony.	you make a payment on a debt you owed anyone who was an insider? relatives of any general partners; partnerships of which you are a general partner; son in control, or owner of 20% or more of their voting securities; and any managing sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations,
1 No	
Yes. List all payments to an insider.	Dates of Total amount Amount you still Reason for this payment
	payment paid owe
Insider's Name	\$\$
Number Street	
City State ZIP Code	
Insider's Name	\$ \$
Number Street	
	Annual Market Annual An
City State ZIP Code	
thin 1 year before you filed for bankruptcy, did you insider? Slude payments on debts guaranteed or cosigned by	NAMERON CERT IN ARRANG SKRIPTER OG SKRIPTER FRANKRING SKRIPTER IN FRANKRING SKRIPTER SKRIPTER FRANKRING.
thin 1 year before you filed for bankruptcy, did you insider? Elude payments on debts guaranteed or cosigned by	
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hin 1 year before you filed for bankruptcy, did yo insider? lude payments on debts guaranteed or cosigned by No	Dates of Total amount Amount you still Reason for this payment payment owe Include creditor's name
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thin 1 year before you filed for bankruptcy, did you insider? Slude payments on debts guaranteed or cosigned by No Yes. List all payments that benefited an insider. Insider's Name City State ZiP Code	Dates of payment paid

Aubrey L. Fox

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Case number (if known)

Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes, **☑** No Yes. Fill in the details. Nature of the case Court or agency Status of the case Pending Case title Court Name On appeal Concluded Number Street Case number City State ZIP Code Pending Case title Court Name On appeal Number Street Concluded Case number City State ZIP Code 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Date Value of the property 0.00 Creditor's Name Number Street Explain what happened Property was repossessed. Property was foreclosed. Property was garnished. ZIP Code Property was attached, seized, or levied. State Describe the property Value of the property 0.00 Creditor's Name Number Street Explain what happened Property was repossessed. Property was foreclosed. Property was garnished. City State ZIP Code Property was attached, seized, or levied.

Aubrey L. Fox

Last Name

First Name

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r 1 Aubrey L. Fox	Case number (if known)
First Name Middle Name Last I	Name
Nithin 90 days before you filed for bankru	otcy, did any creditor, including a bank or financial institution, set off any amounts from your
accounts or refuse to make a payment bec	ause you owed a debt?
No No	
Yes. Fill in the details.	
	Describe the action the creditor took Date action Amount
	was taken
Creditor's Name	
Number Street	\$0.0
Transcr Greek	
City State ZIP Code	Last 4 digits of account number: XXXX
reditors, a court-appointed receiver, a cus	cy, was any of your property in the possession of an assignee for the benefit of stodian, or another official?
reditors, a court-appointed receiver, a cus	todian, or another official?
Yes	
5. List Certain Gifts and Contribut	tions
Gifts with a total value of more than \$600 per person	Describe the gifts Dates you gave Value the gifts
The best extraction to the test of the contract	
	s 0.0
Person to Whom You Gave the Gift	——————————————————————————————————————
	\$
Number Street	
City State ZIP Code	
Person's relationship to you	
• Legisland or a state per perfect. Design a legisland of the state of the state of the state of the state of the	
Gifts with a total value of more than \$600 per person	Describe the gifts Dates you gave Value the gifts
· · ·	
	s0.0
Person to Whom You Gave the Gift	
Number Street	
or an analysis of the second s	
City State ZIP Code	
Person's relationship to you	

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A. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total more than \$600 Charity's Name Number Street City State ZIP Code	Date you contributed	\$600 to any ch	0.00 0.00
No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total more than \$600 Charity's Name	Date you		0.00
☐ No ☐ Yes. Fill in the details for each gift or contribution. ☐ Gifts or contributions to charities that total more than \$600 ☐ Charity's Name ☐ Number Street	Date you		0.00
Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total more than \$600 Charity's Name Number Street		\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	
Gifts or contributions to charities that total more than \$600 Charity's Name Number Street		\$\$	
Charity's Name Number Street		\\ \\ \\$\\ \\$\	
Charity's Name Number Street		\$\$	
Number Street		\$	
Number Street		\$ \$	
Number Street		\$	0.00
		\$	0.00
City State ZIP Code			
City State ZIP Code	THE STATE OF THE S		
t 6: List Certain Losses			
Describe the property you lost and Describe any insurance coverage for the loss how the loss occurred Include the amount that insurance has paid. List pending insurance the loss occurred.	Date of your loss	Value of pro- lost	operty
claims on line 33 of Schedule A/B: Property.			
		\$	0.00
	warman and		
t 7: List Certain Payments or Transfers			
Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or	transfer any proper	ty to anyone	***************************************
you consulted about seeking bankruptcy or preparing a bankruptcy petition?			
include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required	in your bankruptcy.		
			SMOSS -
Yes. Fill in the details.	CASA PARAMAKANAN		医二苯甲酰 化二氯氯化 电影流
	Date payment or transfer was	Amount of t	payment
Yes. Fill in the details.		Amount of t	payment
Yes. Fill in the details. Description and value of any property transferred Person Who Was Paid	transfer was	Amount of p	
Yes. Fill in the details. Description and value of any property transferred.	transfer was	\$	0.00
Yes. Fill in the details. Description and value of any property transferred Person Who Was Paid	transfer was	\$\$	
Person Who Was Paid Number Street	transfer was	\$	0.00
Yes. Fill in the details. Description and value of any property transferred Person Who Was Paid	transfer was	\$	0.00
Person Who Was Paid Number Street	transfer was	\$	0.00

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Aubrey L. Fox First Name Middle Name Last Name Case number (if known)						
	Description and value of any property	transferred	Date payment or transfer was made	Amount of payment		
Person Who Was Paid	_	The control of the co				
Number Street	_			\$		
	1			\$		
Ch.						
City State ZIP Code						
Email or website address	_					
Person Who Made the Payment, if Not You						
I No I Yes. Fill in the details.	37, 33 (A.) (A.) (A.) (A.) (A.) (A.) (A.) (A.)					
	Description and value of any property t	ransferred	Date payment or transfer was	Amount of payr		
Person Who Was Paid			made			
Number Street	~			\$0		
	*			§ 0		
City State ZIP Code						
v lesse service los tiles for bauktst	business or financial affairs?					
ansterred in the ordinary course of your clude both outright transfers and transfers no not include gifts and transfers that you have No	made as security (such as the granting o	f a security interest or	mengage on your prop	orty).		
ansterred in the ordinary course of your clude both outright transfers and transfers no not include gifts and transfers that you have No	made as security (such as the granting o	Describe any property	y or payments received	Date transfe		
ansterred in the ordinary course of your colude both outright transfers and transfers to not include gifts and transfers that you have No	made as security (such as the granting o ave already listed on this statement. Description and value of property	e se Pontre regionalismo	y or payments received			
lithin 2 years before you filed for bankrup ansferred in the ordinary course of your clude both outright transfers and transfers no not include gifts and transfers that you had No Yes. Fill in the details. Person Who Received Transfer	made as security (such as the granting o ave already listed on this statement. Description and value of property	Describe any property	y or payments received	Date transfe		
clude both outright transfers and transfers not include gifts and transfers that you have No. No. Yes. Fill in the details. Person Who Received Transfer	made as security (such as the granting o ave already listed on this statement. Description and value of property	Describe any property	y or payments received	Date transfe		
Ansterred in the ordinary course of your clude both outright transfers and transfers no not include gifts and transfers that you have No No Yes. Fill in the details. Person Who Received Transfer Number Street	made as security (such as the granting o ave already listed on this statement. Description and value of property	Describe any property	y or payments received	Date transfe		
City State ZiP Code Person's relationship to you	made as security (such as the granting o ave already listed on this statement. Description and value of property	Describe any property	y or payments received	Date transfe		
clude both outright transfers and transfers no not include gifts and transfers that you have not include gifts and transfers that you have not include gifts and transfers that you have not include gifts and transfers that you have not include gifts and transfers not not include gifts and transfers. Person Who Received Transfer Number Street City State ZiP Code Person's relationship to you	made as security (such as the granting o ave already listed on this statement. Description and value of property	Describe any property	y or payments received	Date transfe		
clude both outright transfers and transfers no not include gifts and transfers that you have not include gifts and transfers that you have not include gifts and transfers that you have not include gifts and transfers that you have not include gifts and transfers that you have not include gifts and transfers. Person Who Received Transfer Person Who Received Transfer Person Who Received Transfer	made as security (such as the granting o ave already listed on this statement. Description and value of property	Describe any property	y or payments received	Date transfe		

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Financial Account you filed for bankr for you filed for bankr you filed for bankrup or transferred? vings, money market	Description and value of the property, were any financial accounts; certactives, associations, and other financial, Boxes, and Storage Unit r instruments held in your naticates of deposit; shares in	ks ame, or for your bene	Date transfer was made	
Financial Account you filed for bankrup , or transferred? ivings, money market tension funds, cooper	Description and value of the property of the p	Boxes, and Storage Unit r instruments held in your naticates of deposit; shares in	ks ame, or for your bene	Date transfer was made
Financial Account you filed for bankrup , or transferred? ivings, money market tension funds, cooper	Description and value of the property of the p	Boxes, and Storage Unit r instruments held in your naticates of deposit; shares in	ks ame, or for your bene	Date transfer was made
Financial Account you filed for bankrup , or transferred? ivings, money market ension funds, cooper	s, Instruments, Safe Deposit tcy, were any financial accounts of , or other financial accounts; cert ratives, associations, and other fin	Boxes, and Storage Unit r instruments held in your naticates of deposit; shares in	ame, or for your bene	was made
Financial Account you filed for bankrup , or transferred? ivings, money market ension funds, cooper	s, Instruments, Safe Deposit tcy, were any financial accounts of , or other financial accounts; cert ratives, associations, and other fin	Boxes, and Storage Unit r instruments held in your naticates of deposit; shares in	ame, or for your bene	was made
you filed for bankrup , or transferred? wings, money market ension funds, cooper	s, Instruments, Safe Deposit tcy, were any financial accounts of , or other financial accounts; cert ratives, associations, and other fin	Boxes, and Storage Unit r instruments held in your naticates of deposit; shares in	ame, or for your bene	was made
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vings, money market ension funds, cooper	atives, associations, and other fir	icates of deposit; shares in ancial institutions.	banks, credit unions	,
ension funds, cooper	atives, associations, and other fir	ancial institutions.	anne, er an annen	•
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		rana estencia de estencia estencia		
	Last 4 digits of account number	instrument clos		it balance before sing or transfer
stitution	XXXX	☐ Checking	s	0.00
		☐ Savings		******
		☐ Money market		
		-		
State ZIP Code	enderstern som til som en en en en en en en en en en en en en	Other		a consumer of
	XXXX	Checking	\$	0.00
titution		☐ Savings		
		Money market		
		r		
		☐ Brokerage		
State ZIP Code		☐ Other		
	State ZIP Code	State ZIP Code	XXXX- Checking Savings Money market Brokerage State ZIP Code Other XXXX- Checking State ZIP Code	XXXX- Checking \$ Savings Money market Brokerage Other XXXX- Checking \$ Savings

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Debtor 1	Aubrey L. Fox First Name Middle Name	Case number (if known)	
22. Hav		unit or place other than your home within 1 year before you filed for ban	kruptcy?
	Yes. Fill in the details.		
		Who else has or had access to it? Describe the contents	Do you still have it?
	Name of Storage Facility	Name	☐ No☐ Yes
	Number Street	Number Street	
		CityState ZIP Code	
• • • • • • • • • • • • • • • • • • • •	City State ZIP Co	de	esses section to the contract of the contract
Part 9	Identify Property You H	old or Control for Someone Else	
or l		hat someone else owns? Include any property you borrowed from, are st Where is the property? Describe the property	toring for,
	Owner's Name		\$0.00
	A	Number Street	
	Number Street	PART CONTROL OF THE PART OF T	
		City State ZIP Code	
	City State ZIP Co.	de State 24 Code	
Part 1	Give Details About Envi	ronmental Information	
or the	e purpose of Part 10, the following	definitions apply:	
haz	ardous or toxic substances, waste	, state, or local statute or regulation concerning pollution, contamination is, or material into the air, land, soil, surface water, groundwater, or other rolling the cleanup of these substances, wastes, or material.	, releases of r medium,
site		operty as defined under any environmental law, whether you now own, o	perate, or
a Haz	•	n environmental law defines as a hazardous waste, hazardous substance	e, toxic
	· ·	ings that you know about, regardless of when they occurred.	
4. Has	any governmental unit notified yo	u that you may be liable or potentially liable under or in violation of an en	vironmental law?
	No Yes. Fill in the details.		
		Governmental unit Environmental law, if you know it	Date of notice
	Name of site	Governmental unit	
,	Number Street	Number Street	
i	Number Street	Number Street	
		City State ZIP Code	
4	City State ZIP Code		

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tor 1 Aubrey L. Fox First Name Middle Name Last Name Case number (# known)			
	ental unit of any release of hazardous ma	aterial?	
No Yes. Fill in the details.			
Tes. Fill in the details.	Governmental unit	Environmental law, if you know it	Date of notice
	निर्मातनि प्रयोग्यस्य स्थापना । १८०० व व्यवस्थातः (। १८८८ - १८८८ - १८८८ - १८८८ - १८८८ - १८८८ - १८८८ - १८८८ - १८८८ - १८८८ - १८८८ - १८८८ - १८८८ - १८८८ - १८८८ - १८८८	Timoundamant and a law and a	AND THE DATE OF HOUSE AND
Name of site	Governmental unit		T OPPORTUNE LAND
Number Street	Number Street	MANAGAMAN	-
<u> </u>	City State ZIP Code	· le	
City State	ZIP Code		
		The second secon	**************************************
	icial or administrative proceeding under	r any environmental law? Include settleme	ents and orders.
No Fill of the N			
Yes. Fill in the details.		A SINGA KARANGA KANDA KATAN BANDA KA	
	Court or agency	Nature of the case	Status of the case
Case title			Pending
	Court Name		On appeal
	Number Street	· .	☐ Concluded
A			:
Case number	City State ZiF	P Code	
rt 11: Give Details About \	Your Business or Connections to A	Manager 11 - 12 - 12 - 12 - 12 - 12 - 12 - 12	
☐ A member of a limited liab ☐ A partner in a partnership ☐ An officer, director, or ma ☐ An owner of at least 5% of ☐ No. None of the above applies	anaging executive of a corporation of the voting or equity securities of a corp or. Go to Part 12. The and fill in the details below for each b	partnership (LLP) poration business.	
	Describe the nature of the busi	lness Employer Identificati	
Business Name			
Number Street		EIN:	
13		And the second s	
	Name of accountant or bookke	abar was a series of the series of the series	ed Alle Comments to be
	Name of accountant or bookke		
City State Z	Name of accountant or bookkee	From T	
City State 2		From T	o mumber
City State Z	ZIP Code	From T	
Business Name	ZIP Code	From T	o mumber
	ZIP Code	FromT iness Employer identification Do not include Social EIN:	on number Security number or ITIN.
Business Name	ZiP Code Describe the nature of the busin	FromT iness Employer identification Do not include Social EIN:	on number Security number or ITIN.
Business Name Number Street	ZiP Code Describe the nature of the busin	FromT Iness Employer Identification Do not include Social EIN: eper Dates business existe	on number Security number or ITIN,

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Aubrey L. Fox First Name Middle Name Las	ame Case number (# known)		
to the form of the following of the second state of the second sta			
	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN	
Business Name	_	Do not mistade doctal decarry number of TITM	
		EIN:	
Number Street	Name of accountant or bookkeeper	Dates business existed	
	-		
City State ZIP Code	-	From To	
hin 2 years before you filed for bankru titutions, creditors, or other parties. No Yes. Fill in the details below.		nyone about your business? Include all financial	
Name	Oate issued MM / DD / YYYY		
Number Street			
*****	•		
City State ZIP Code			
2: Sign Below			
ave read the answers on this <i>Statemen</i> swers are true and correct. I understan	nt of Financial Affairs and any attachments, nd that making a false statement, concealing n result in fines up to \$250,000, or imprison	and I declare under penalty of perjury that the g property, or obtaining money or property by fra ment for up to 20 years, or both.	
· Andrew	*		
Signature of Debtor 1	Signature of Debtor 2		
Signature of Debtor 1	Signature of Debtor 2		
Date 8/24/2018	Signature of Debtor 2		
Date 8/24/2018	Signature of Debtor 2	s <i>Filing for Bankruptcy</i> (Official Form 107)?	
Date 8/24/2018	Signature of Debtor 2	s <i>Filing for Bankruptcy</i> (Official Form 107)?	
Date SAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	Signature of Debtor 2		
Date $\frac{S/JU/JU}{S}$ d you attach additional pages to <i>Your</i> S No Yes	Signature of Debtor 2 Date Statement of Financial Affairs for Individuals o is not an attorney to help you fill out bank		

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Fill in this in	formation to ident	ify your case:		i.
Debtor 1	Aubrey L. Fox	Middle Name		
Debtor 2	*****	micale Name	Last Name	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court for the	ne: Northern District of II	linois	
Case number (if known)				

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C1
Creditor's name:	☐ Surrender the property.	☑ No
defining management of a contraction of the contrac	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
•	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	Mo
name:		Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
v	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	☑ No
name:	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
·	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	☑ No
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
•	☐ Retain the property and [explain]:	

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Aubrey	L. Fox		Case number (If known)
First Name	Middle Name	Last Name	Caco (white)

Part 2:	List Your Unexpired Personal Property Leases	

Describe your unexpired personal property leases	Will the lease be assumed?	Will the lease be assumed?	
.essor's name:	☑ No		
Description of leased property:	The state of the formation of the state of t		
.essor's name:	☑ No	**************************************	
Description of leased property:	☐Yes		
essor's name:	₩ No		
Description of leased roperty:	☐ Yes		
essor's name:	₩ No	L-PLC-SEEMAM	
escription of leased roperty:	Yes		
essor's name:	₩ No	ernir-riselezeouel	
escription of leased roperty:	Yes		
essor's name:	IJ No	ace continues and the continues of the c	
escription of leased operty:	Yes		
essor's name:	≥ No	EMPHROLIZ	
escription of leased operty:	Yes		
		T.T.T. INDICATION OF	
3: Sign Below			
der penalty of perjury, I declare that I have indicated my intentio sonal property that is subject to an unexpired lease.	n about any property of my estate that secures a debt and any		
912			
I will be the second of the se			